



Closed House Program

*First Name

*Last Name

*Local Address (House to be placed in Program)

*City

*State

*Zip

Phone number where you can be reached (e.g. your cell phone number) Please include the area code. This could include a landline number.

*Out of Town Address (Where you will be located while away)

*City

*State

*Zip

Out of Town Phone (Where you can be reached while away)*

*Email Address

Secondary Email Address

*Date Leaving (MM/DD/YYYY)

*Date Returning (MM/DD/YYYY)

Are any persons authorized to be on your property? Please specify name, when they are allowed, and what they are there for (Pool Maintenance, Housekeeping, Landscaping, etc...)



Closed House Program

Please list any other key holders and their phone numbers

Alarm Company

Alarm Code

Alarm Representative and Phone Number

Are there cars in the driveway? Yes_____ No_____

Please do not leave your vehicle on the roadway as it can be cited and towed for violating the Town's 48 hour parking prohibition

If yes, please describe the vehicle(s)

Do you have a gate code? Yes_____ No_____

If yes, please provide it for entry from emergency personnel should we need to respond (specifically for alarm call outs, fire alarms, or an emergency) _____

Will any lights be left on or placed on timers in your home? Please specify which rooms and times

Did you stop your newspaper delivery? Yes_____ No_____ N/A_____



Closed House Program

Have you arranged for your mail delivery? Will your mail be forwarded, held at the post office, or will someone be picking up the mail? Yes _____ No _____

Comments and Miscellaneous Information

I understand that I must contact the Palm Beach Police Department at 561-838-5454 immediately upon my return to remove my address from the Closed House Program Yes _____ No _____

Signature _____

Date _____