VACATION CHECK

WEBER COUNTY SHERIFF'S OFFICE
UINTAH PRECINCT

DATE _____

NAME _____ PHONE _____

ADDRESS _____

In case of emergency, contact: NAME _____

ADDRESS _____

DATE LEAVING _____ DATE RETURNING _____

LIST NAMES OF PERSON(S) CARING FOR LAWNS, PETS, ETC., _____

_____

COMMENTS, SPECIAL REQUESTS, INFORMATION _____

_____

_____

Always leave a light on!!!...LIST LOCATION _____

PLEASE READ BEFORE SIGNING

I, _____ give my permission to Deputies of the Weber County Sheriff's Office to patrol my property and to arrest all person(s) trespassing upon my property at the above listed address, if they feel it necessary to protect said property.

Signed _____

Witnessed _____

DATE	TIME	DEPUTY	COMMENTS