



# Memorial Thicket Security OUT OF TOWN NOTICE

Date: \_\_\_\_\_

Time: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

LEAVING: _____	RETURNING: _____
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Do you want the Guards to walk the perimeter of your home once per day: Yes \_\_\_\_\_ No \_\_\_\_\_

PAPER: None \_\_\_\_\_ Stopped \_\_\_\_\_ Pickup \_\_\_\_\_

LIGHTS: Timers \_\_\_\_\_ On \_\_\_\_\_ Off \_\_\_\_\_

MAIL: On Hold \_\_\_\_\_ Pick Up \_\_\_\_\_ Leave in Mailbox \_\_\_\_\_

WATER: On \_\_\_\_\_ Off \_\_\_\_\_

PETS: \_\_\_\_\_

CARS: \_\_\_\_\_

EMERGENCY #: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_