To Use Stanford University Department of Public Safety Forms

Please print the necessary form, complete all requested information and add any supporting documentation. Return it to Stanford University Department of Public Safety.

It may be returned:

By Email: stanfordpolice@lists.stanford.edu

By U.S. Mail to: Stanford University
Department of Public Safety
711 Serra Street
Stanford, CA 94305-7240
(Please allow time for mail delivery)

By Campus ID Mail to: Public Safety
Mail Code 7240
(Please allow time for mail delivery)

By Fax to: 650-323-1178

or By delivery in person: Public Safety Building
Police and Fire Departments
711 Serra St.
Stanford, CA 94305-7240

If you have any questions call SUDPS at 650-723-9633.
Stanford Department of Public Safety
House Check Form

Address: ________________________________

Phone: ________________________________

Name: ________________________________
(Fl replacement)

Emerg. Contact #: ______________________

Departure Date: ________________________

Return Date: __________________________

Type of Service Requested:
(circle one)

- Home Service
- Spot Check

Yes/No | Comments
---|---

1. Is the house alarmed?

2. Any pets in the yard?

3. Any lights on in the residence? If so, What type and where are they located? What time do they turn on and off?

Please record location(s) & on/off times here:

4. Has the newspaper been stopped?

5. Has the mail been stopped?

6. Can access to the rear yard be obtained?

Person(s) Visiting House While Resident(s) Away:

Name: ________________________________

Relationship: __________________________

Home Address: _________________________

Phone Number: _________________________

Day(s)/Times Expected: __________________

Yes | No |
---|---|

House Key Issued?

Yes | No |
---|---|

House Key
Issued?

Yes | No |
---|---|

Special Instructions: Notes: (Cars in driveway, broken windows, construction, gardeners, house cleaners, house sitters, or any additional info).

REQUEST RECEIVED BY: ___________________________ DATE: ___________________________