

Vacation Checks

As of September 1st, 2021 The Island County Sheriff's Office will begin doing vacation checks again. Please note our current policies below.

If check can be done with drive by and a visual from the road or from an easily accessible driveway we will do a check on the property.

The check will be done visually from the car, we will not enter your property nor can we open gates.

Vacation checks can be requested for time periods between 4 days and 90 days.

Please email/fax/mail your form into the address on the form below.

ISLAND COUNTY SHERIFF'S OFFICE

Request for Vacation Security Check

INCIDENT #_____

YOU MAY E-MAIL THIS TO: ICSO@ISLANDCOUNTYWA.GOV

Mail to the Island County Sheriff Office, PO Box 5000, Coupeville, WA 98239-5000
OR You may bring the filled form to the Sheriff's Business office on M-F, 8-4:30 at 101 NE 6th St, Coupeville

BEGIN ON:

END ON:

Name (PRINT): _____ Address: _____

Date of Birth: _____ Home Telephone: (____) _____ Cell: _____

E-mail address: _____

ALARM INFORMATION

Is there an alarm on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Alarm: <input type="checkbox"/> Audible <input type="checkbox"/> Silent <input type="checkbox"/> Other Alarm Maintenance Company: _____
---	--

PROPERTY INFORMATION

Describe Residence (color, style, stories, etc):

Are the House Numbers Visible on Residence? Yes No Are Apt or Space Numbers Posted? Yes No

Is the residence visible from the street? Yes No (If "NO" describe landmarks to make it easier to locate):

Will interior lights be on Constantly?
 Yes No

Are lights on a timer?
 Yes No

Will drapes/curtains/blinds be:
 Open Closed

Will there be vehicle(s) visible on property: Yes No (If yes place describe)

License Plate Number: Make / Model / Color / Year:

License Plate Number: Make / Model / Color / Year:

License Plate Number: Make / Model / Color / Year:

Are there animals on the property? Yes No What kind: _____

Are the animals loose on property: Yes No

Will Someone be on your property to care for the animals? Yes No (If YES please fill out below)

Animal care person: Phone number ()

Does anyone else have keys to the property? Yes No

Will they be coming on the premises during your absence? Yes No (If Yes explain below)

Name: _____

Name: _____

Address: _____

Address: _____

Phone Number: ()

Phone Number: ()

How can you be reached incase of an emergency:

Signature: **X** _____ Date: _____

PLEASE REMEMBER TO CALL ICOM AS SOON AS YOU RETURN

From North Whidbey: 679-9567 From South Whidbey: 321-4400 From Camano Island: 629-2224