Form Received By:	Quail Creek Patrol Vacation Watch Request	Initial Check by Patrol:
____________________ Date Received:	**Drop off completed form at gatehouse or concierge desk** **Home checks will be done during the dates you indicate below.** ***Upon your return to Quail Creek, please notify the gatehouse.*** **If your return date changes call the gatehouse @520-393-2941**	*Date:* ____________ *Time:* ____________ *Officer:* __________ *Rear Entry:* *L R E* *Comments:*

Quail Creek Patrol
Vacation Watch Request

Departure Date ______________________ **Date Vacation Watch Ends**___________________

If your return date changes call the gatehouse @ 520-393-2941

Last Name ___________________________________ **First Name** _______________________

Owner / Renter (circle one) **UNIT #**_________ **LOT#**__________

Address ____

Home Ph# (_______) ________ - ____________ Cell # (_______) ________ - ____________

Other Ph# (_______) ________ - ____________ Specify ______________________________

E-mail Address ____

Emergency Contact Name/Number ____

Additional information such as pet sitter, housekeeper, guest/renter, scheduled home repair:

____

____

NAME/PHONE OF LOCAL CONTACT PERSON, PROPERTY MANAGEMENT, OR HOME WATCH COMPANY.

____ ____________________________

CONTACT or COMPANY NAME **PHONE**

____ ____________________________

CURRENT LANDCAPING COMPANY **PHONE**

DOES YOUR LANDSCAPER HAVE PERMISSION TO DO EMERGENCY WORK IN YOUR ABSENCE IF WE CANNOT REACH YOU? ______ YES ______ NO

IN THE CASE OF A LONG TERM ABSENCE, THE FOLLOWING INFORMATION HAS BEEN PROVIDED FOR CHANGE OF ADDRESS:

Quail Creek Crossing: Chelsea Johnson 1-800-223-7317, Chelsea.Johnson@Robson.com
Property Owners Dues: Jennifer Malis, 1-800-223-7317, Jennifer.Malis@Robson.com
Robson Credit Card: Janice Ippolito 1-800-223-7317, memberar@Robson.com

Patrol Checks
Date & Initials

____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____
____