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:*

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:

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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

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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

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Revised 4/10/2018