

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? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are Apt or Space Numbers Posted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the residence visible from the street? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "NO" describe landmarks to make it easier to locate): _____		
Will interior lights be on Constantly? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are lights on a timer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will drapes/curtains/blinds be: <input type="checkbox"/> Open <input type="checkbox"/> Closed
Will there be vehicle(s) visible on property: <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No What kind: _____		
Are the animals loose on property: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Will Someone be on your property to care for the animals? <input type="checkbox"/> Yes <input type="checkbox"/> No (If YES please fill out below)		
Animal care person: _____	Phone number (____) _____	
Does anyone else have keys to the property? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Will they be coming on the premises during your absence? <input type="checkbox"/> Yes <input type="checkbox"/> 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