



PITTSFIELD DEPARTMENT OF PUBLIC SAFETY

6227 W. Michigan Ave. • Ann Arbor, Michigan 48108 • (734) 944-4911

Fax (734) 944-0744

"A Diverse And Welcoming Community"



John W. Phillips
Director of Public Safety

Vacation Notification Instructions:

In the event your absence will be extended or you return home early please contact this Department so we may update our records

If you have a residential burglary or fire alarm system that is monitored by a private vendor please supply your "contact person" listed on the notification form with the phone number for the alarm company and password for the alarm system. This may prevent unnecessary repeated responses from police and fire units should there be trouble with the alarm system. This will also allow the alarm system to be reset if activated.

If you have an audible alarm please instructed your "contact person" how to reset or disable the alarm should there be an activation of the alarm.

In the "additional information" section please let us know if there are any pets, materials, or objects that may pose a danger to public safety officers should they responded to your residence.

If someone is not picking up your mail and paper please contact the postal service and paper carrier and ask them to place a hold on delivery.

If you are on Township water please remember that odd/even watering restrictions are in effect.

In the event that you need to contact this Department please call 734-944-4911 extension 0 for assistance.

Once you have completed the online form please fax, mail, or drop off the form at the Police Department.



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VACATION NOTIFICATION FORM

I understand that the Charter Township of Pittsfield, It's Department of Public Safety, employees and agents are not assuming responsibility for the property that I represent. I agree to hold Pittsfield Township harmless from any action or inaction pursuant to my notification that I will be absent from the listed property. Further, I understand those identified above are not assuming additional liability as a result of my notification and I will not hold them responsible.

Signature (property owner or representative)

Date

Name: Last: _____ First: _____ M: _____

Address: _____

Phone: _____ Cell: _____ Other/Email _____

Date/Time of Departure: ____/____/____. AT ____: ____ __ AM __ PM

Date/Time of Return: ____/____/____. AT ____: ____ __ AM __ PM

Contact Person in case of an emergency:

Name: Last: _____ First: _____ M: _____

Address: _____

Phone: _____ Cell: _____ Other/Email _____

Name: Last: _____ First: _____ M: _____

Address: _____

Phone: _____ Cell: _____ Other/Email _____

Person(s) authorized to be at or on the property

Reason: _____

Name: Last: _____ First: _____ M: _____

Address: _____

Phone: _____ Cell: _____ Other/Email _____

Additional Information:

