

**POLICE**  
218.568.8111  
Fax 218.568.5647  
[plpd@pequotlakes-mn.gov](mailto:plpd@pequotlakes-mn.gov)



**Mike Davis**  
Chief of Police  
4638 Main St  
Pequot Lakes, MN 56472

[www.pequotlakes-mn.gov](http://www.pequotlakes-mn.gov)

**PROPERTY OWNER INFORMATION:**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_ Telephone: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

Property Vacant From: \_\_\_\_\_ Returning: \_\_\_\_\_  
Reason for Vacancy: \_\_\_\_\_

Property Owner Will Be At  
(ADDRESS): \_\_\_\_\_  
Telephone: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION (Please provide two):**

Full Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_ Telephone: \_\_\_\_\_

Full Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_ Telephone: \_\_\_\_\_

**CHECK APPLICABLE BLANKS BELOW:**

LIGHT ON AT NIGHT:  YES  NO      PAPER/MAIL STOPPED:  YES  NO  
NEIGHBORS ALERTED:  YES  NO      WALK & DRIVE SHOVELED:  YES  NO

I, \_\_\_\_\_ understand, that the Pequot Lakes Police Department  
[PROPERTY OWNER'S SIGNATURE]

can not keep my residence/business or other property real or personal, under constant surveillance twenty-four (24) hours a day. I therefore, absolve the Pequot Lakes Police Department of any responsibility or any liability should my residence/business, or any other property be entered and a loss of or damage occur. **I will contact the Pequot Lakes Police Department as soon as I return to my residence/business.**

\_\_\_\_\_  
OWNER'S SIGNATURE

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
DATE OF RETURN CALL

\_\_\_\_\_  
TIME

This form may be faxed, mailed, e-mailed or hand-delivered to the Pequot Lakes Police Department.