



Hot Springs Village
Property Owners' Association

VACATION WATCH
HOT SPRINGS VILLAGE POLICE DEPARTMENT

Date: _____

Please have the following home watched:

Address: _____

Name: _____

Phone number: _____

Vehicles left: _____

Lights on timers: Yes _____ No _____

Date Leaving: _____

Date Returning: _____

This vacation watch is valid for 90 days only. For additional time contact the Police Dept. prior to expiration.

PERSON TO NOTIFY IN CASE OF EMERGENCY

Name (local): _____ Phone: _____

Name (distant): _____ Phone: _____

Destination: _____

Paper and deliveries stopped: Yes _____ No _____

PLEASE CALL 922-0011 ON RETURN

Please return this form to the Hot Springs Village Police Department, by email (dps@hsvpoa.org), by fax (501-922-5851), or by mail or in person to 113 Calella Road, Hot Springs Village, AR 71909. Please consider the time it takes for forms to reach the police department, if mailing, and send accordingly.