



# The Commonwealth of Massachusetts

## STATE 911 DEPARTMENT NORTH SHORE REGIONAL 911 CENTER

18 MANNING AVENUE • MIDDLETON, MASSACHUSETTS 01949 • www.MASS.GOV/NSR911  
BUSINESS: (978) 801.4911 • nsrc-recc911@mass.gov  
24/7 OPERATIONS: (978) 646.8402



### House Check Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Alternate Number: \_\_\_\_\_

Date Leaving: \_\_\_\_\_

Date Returning: \_\_\_\_\_

Primary Emergency Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Other Emergency Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Description of House: \_\_\_\_\_

Who is authorized to be on the property? Please indicate their license plate, vehicle description, and scheduled time on property: \_\_\_\_\_  
\_\_\_\_\_

Do you have any pets that will be on the property (anyone checking them)? \_\_\_\_\_  
\_\_\_\_\_

Will any cars be left in the driveway? (If yes, make, model, and plate) \_\_\_\_\_  
\_\_\_\_\_

Will any lights be left on or on timers? \_\_\_\_\_

Is the house alarmed?  Yes |  No If yes, Alarm Company name and number? \_\_\_\_\_  
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#### FOR AGENCY AND NSR911C USE ONLY

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NSR911C – Print/fax completed form to appropriate agency. Date/time faxed: \_\_\_\_\_

AGENCY House Check #: \_\_\_\_\_