



City of Kerman

850 S. Madera Ave, Kerman CA 93630
(559) 550-0559 Fax: (559) 842-0362



Request for Patrol House Checks

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Name of Emergency Contact: _____

Emergency Contact Address: _____

EmergencyContact Phone Number: _____

Does Emergency Contact have a key to the property? ☐ Yes ☐ No

Does the property have an alarm? ☐ Yes ☐ No Alarm Company: _____

Date Leaving: _____

Date Returning: _____

Lights: ☐ On ☐ Off ☐ On a Timer

Vehicles on Premises (make, model, license number, and color)

Make: _____ Model: _____ License Plate #: _____ Color: _____

Animals on Premises (dogs, cats, etc.) ☐ Yes ☐ No

Will anyone be taking care of the residence while away (neighbor, gardener, housekeeper, maintenance, etc.)? Yes No

Additional Information:

Once the form is completed you may email the form to kepd.public@fcle.org. You may also mail or drop it off to the address above.