



VILLAGE OF BARKER VACATION FORM

NAME: Date Completed:

ADDRESS:

PHONE #: Home Cell

DATES YOU WILL BE AWAY: through

KEYS AVAILABLE: YES NO WITH WHOM:

THEIR PHONE #: Home Cell

LOCATION WHERE YOU CAN BE REACHED:

ADDRESS:

PHONE #: Business Cell

EMERGENCY CONTACT NAME:

EMERGENCY CONTACT PHONE #: Home Cell

ANY LIGHTS ON TIMER: YES NO

IF YES, THEN WHAT ROOMS:

PEOPLE WITH PERMISSION TO BE ON THE PREMISE:

WHAT TYPE OF VEHICLE DO THEY DRIVE?

ADDITIONAL COMMENTS: