



Chapel Hill Police Department

House Check

Release of Liability



**Please carefully read the following Release of Liability for a house check on your home. Be sure you fully understand its contents before signing. If the property is jointly owned or rented, signatures of all owners/ renters are required.

I/We, the undersigned, have requested the Chapel Hill Police Department to provide a house check of my/our premises during the period of _____ to _____. I/We understand that this service will be provided only on a "when-available" basis. Further I/we acknowledge and recognize that the Chapel Hill Police Department cannot guarantee that I/we or my/our property will not suffer any injury. I/We further acknowledge that I/we have established no special relationship, nor is there a special duty owed to me/us by the Chapel Hill Police Department and/or the Town of Chapel Hill. In consideration of the Chapel Hill Police Department performing this house check, I/we do hereby release, acquit, forever discharge and hold harmless the Town of Chapel Hill, its officers, employees, agents, assigns, and successors from any and all liability for any and all claims of damages, demands, and causes of action that exist or could arise, or other remedies against the Town of Chapel Hill, its officers, employees, agents, assigns and successors as a result of any damage or other incident to or on my/our property by third persons during the period of _____ to _____.
START DATE END DATE START DATE END DATE

Owner/Renter: _____

Owner/Renter 2: _____

Address: _____

Address: _____

Address: _____

Address: _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Date: _____

Date: _____

Signature: _____

Signature: _____

Witness Name: _____

Date: _____

Witness Signature: _____

Address of House Check: _____

House Check Beginning Date: _____ Date of Return: _____

Emergency Contact Person (Name, Address, Telephone):

Yes	No		Yes	No	
		Pets in yard?			Newspaper stopped?
		Fence/gate locked?			Mail stopped?
		Any broken windows/glass?			Notified neighborhood watch?
		Cars in garage/driveway? If yes provide description below.			Anyone to be on property (gardener, maid, etc.)? If yes, list below.
		Do you have a security alarm?			Lights on inside/outside? Any on timer?

Miscellaneous/additional information:

Police Department Use Only:

Officer Checks

Date: _____ Time: _____ Officer: _____

Remarks: _____

Date: _____ Time: _____ Officer: _____

Remarks: _____

Date: _____ Time: _____ Officer: _____

Remarks: _____

Police Department Use Only:

Received by: _____ Date: _____ Time: _____ Assigned Area: _____