



**Blackfeet Law Enforcement Services  
Browning, MT 59417  
406-338-4000**

**House Watch Request Form**

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

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Print Name Residence Location

How long will you be out of Town: From: \_\_\_\_\_ to \_\_\_\_\_.

Number you can be reached at: \_\_\_\_\_ or \_\_\_\_\_.

Will all of you be gone?  Yes  No

If No, please list who will be in the house: \_\_\_\_\_

If No, Do they have a house key?  Yes  No

Are you going to have anyone else watch your house?  Yes  No

If yes, please list below who in case of an emergency needs to be contacted:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Did you leave any lights on?  Yes  No If yes, please check the ones below.

Front Porch  Back Porch  Kitchen  Living Room  Hall Way  Bathroom

Bedroom (which one) \_\_\_\_\_  Garage

Other \_\_\_\_\_

Will any vehicles be parked at the residence, if yes, please list.  Yes  No \_\_\_\_\_

Is there anything special we should know, if yes, please list:  Yes  No \_\_\_\_\_

***I, \_\_\_\_\_, authorize the Blackfeet Police Dept., Housing Security, EMS, if needed to enter my house while the house watch is in effect. I will not hold any of the departments mentioned accountable for lost, stolen or broken items if entrance has to be made. I will not hold any of the departments accountable if forced entry is needed to enter my home. I will be responsible for any damage.***

\_\_\_\_\_  
Signature of Homeowner/Resident  Authorized over Phone  In Person

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Dispatcher/Officer: \_\_\_\_\_