



KENNEBUNK POLICE DEPARTMENT

KENNEBUNK, MAINE



Robert F. MacKenzie, Chief of Police

VACANT PROPERTY FORM

KPD Use Only: IMC Site Code: _____ Date Entered: _____
By: _____

Last Name: _____ First Name: _____ DOB: _____
Physical Address of Site: _____
Mailing Address (if different): _____
Phone number at this location: _____ Secondary Phone at this location: _____
Telephone Number to Reach Owners during Vacancy: _____ Second Phone: _____
Date Leaving: _____ Date Returning: _____

Please contact the Kennebunk Police Department if returning before your original return date.

If someone will check this location besides the police department, please list their names, vehicles, and when they will be at the location. Please list in order you wish for them to be called. _____

Will any vehicles be left at this location? No Yes

#1 Color: _____ Year: _____ Make: _____ Model: _____ Plate: _____ State: _____

Where will this vehicle #1 be left? In Driveway Other _____

#2 Color: _____ Year: _____ Make: _____ Model: _____ Plate: _____ State: _____

Where will this vehicle #2 be left? In Driveway Other _____

Additional Information (use the back or additional sheets in necessary):