



HARRISBURG POLICE DEPARTMENT VACATION / EXTRA PATROL REQUEST

For department use: A unique VEP request number is assigned when the online request is submitted.

Request ID: VEP-_____

REQUESTOR INFORMATION

Full Name: _____

Property Address: _____

City / State / ZIP: _____

Primary Phone: _____ Email: _____

Best Time to Contact (select all that apply): ☐ Morning ☐ Afternoon ☐ Evening

REQUEST DETAILS

Location Type: ☐ Residential ☐ Business ☐ Other: _____

Reason for Extra Patrol: ☐ Vacation ☐ Business will be vacant ☐ Residence will be vacant ☐ Other

If Other, explain: _____

Patrol Start Date: _____ Start Time: _____

Patrol End Date: _____ End Time: _____

EMERGENCY CONTACT

Contact Name: _____ Relationship: _____

Contact Phone: _____ Alternate Phone: _____

PROPERTY INFORMATION

Select all that apply: ☐ Alarm system ☐ Exterior lights ☐ Interior lights / timers ☐ Pets at property
☐ Vehicles remaining ☐ Neighbor / caretaker has key ☐ Authorized persons may enter

Vehicles remaining (year / make / model / color / plate):

Authorized persons / caretakers who may be on the property:



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SPECIAL INSTRUCTIONS FOR OFFICERS

Include any gate codes, alarm instructions, animal information, access limitations, recurring deliveries, or other details officers should know.

REQUESTOR CERTIFICATION

I certify that the information provided in this request is true and accurate to the best of my knowledge. I understand that submitting this request does not guarantee continuous surveillance, does not create a special duty, and does not replace appropriate security measures. I will notify the Harrisburg Police Department if the dates, contacts, or other information in this request change.

☐ I affirm that the information provided is true and accurate.

Typed / Printed Name (Signature): _____

Date: _____ Best Contact Phone: _____

DEPARTMENT USE ONLY

Date Received: _____ Received By: _____

Request ID: _____ Disposition / Notes: _____

Officer / Shift Notes: