Hide-A-Way Lake Club, Inc. Vacation Check List

Please return to HAWL office or Main Guard Gate

Lot #									Name				
Addr				-		Phone Number							
Date/Time Leaving							-		Date Returning				
Light	, Timer	Yes ()	No()T	imer Lo	cation _						-		
Addit	ional C	comme	nts:										
			t Informa										
Name									Phone I	Number			
If son	neone (other tl	han Emer	gency (Contact is	checkin	g the hom	e, plea	ise provi	de nam	e		
Date/Time Checked	Front Door	Back Door	Windows		Lights on?	Heat/Air Running?	Boat & Dock	Shed	Outside Faucets	# of cars		Officer's Initials	

Date/Time Checked	Front Door	Back Door	Windows	Garage	Lights on?	Heat/Air Running?	Boat & Dock	Shed	Outside Faucets	# of cars	Comments	Officer's Initials