

## Fort Leavenworth Frontier Heritage Communities II, LLC

## **Extended Absence from Home**

l,	residing at	, will be absent
	through. While I	
	(phone#) or via email at	
☐ I will have someone res	ponsible for checking in on my home c	luring my absence.
<ul> <li>The person resp</li> </ul>	onsible for looking after my home is:	
residing at	They	can be reached at
(phone#) or via	email at	
☐ I request and grant an F	LFHC representative permission to er	nter the dwelling during my absence to
conduct periodic visits to	o check on: thermostat, power status a	and running water.
home resulting from non-co	r and no more than 80 degrees in warmpliance are the responsibility of the most onsibility to contact the MP station to in	ne resident (Resident Initials)
absence.		
*Homes that will be v	acant for more than 30 days will h	ave water shut off to
avoid water leaks.* F	Please notify maintenance immedia	tely if plans change
and returning sooner	than date indicated above.	
Resident Signature	 Date	
FLFHC Representative		