**OPÉRATION TRANQUILLITÉ VACANCES**

 **Formulaire de demande individuelle**

**Pour bénéficier de la surveillance de votre résidence en votre absence, merci de remplir ce formulaire en ligne, de l’imprimer et de vous rendre, muni de celui-ci, à la mairie. Des formulaires sont également disponibles à l’accueil de votre mairie.**

**ATTENTION :**

● L’opération tranquillité vacances doit être demandée en avance (48 h avant votre départ au minimum).

● En cas de vacances interrompues, prévenez la police municipale de votre retour.

**\*Veuillez renseigner impérativement les informations en rouge pour bénéficier de ce service.**

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|  | **VOTRE PÉRIODE D’ABSENCE\*** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | **VOTRE ADRESSE (RÉSIDENCE A SURVEILLER)** | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Numéro et type de voie (allée, rue, avenue, etc.)\* : ..................................................................................................................... | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | **INFORMATIONS SUR VOTRE RÉSIDENCE** | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | ***Type de résidence\* :*** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | | | Maison | | | Appartement. Dans ce cas, merci de remplir les deux lignes suivantes : | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | ***Existence d’un dispositif d’alarme\**** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | **PERSONNE À PRÉVENIR EN CAS D’ANOMALIE** | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Numéro de téléphone portable\* : .......................................... | | | | | | | | | | | | |  | |  |  |  |  | . | | Téléphone fixe\* ..................................................... | | | | | | | |  | |  | |  |
|  | *(un numéro à préciser au minimum)* | | | | | | | | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Cette personne possède-t-elle les clés du domicile ?\* | | | | | | | | | | | | | | | | | | | | Oui  Non | | | | | | | | | | | | |  |
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|  | **RENSEIGNEMENTS UTILES** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Votre lieu de vacances : code postal : ......................... | | | | | | | | | | | | | | | |  |  | Ville :....................................................................................................... | | | |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Êtes-vous joignable pendant votre absence : | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  | \* |
|  |  | | | Non | | | Oui, à ce(s) numéro(s) de téléphone : | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  | mention |
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|  | Autre renseignement : | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Je déclare ces renseignements exacts et m’engage à signaler tout retour anticipé.

J’autorise la conservation de ces données pendant deux ans aux fins d’une éventuelle réinscription à l’opération tranquillité vacances. En l’absence de réinscription, ces données seront effacées. Conformément à la loi informatique et libertés du 6 janvier 1978, je bénéficie d’un droit d’accès et de rectification à ces données, auprès du service de police qui a traité ma demande.

Date : ……………………… **Signature** :