



Fiddler's Home Watch

by Roger Myers

Caring for your home while you're away.

Permanent Residence Information

Name(s): _____

Address: _____
Not your Florida Home

Home #: _____

Emergency #: _____

Work #: _____

Other #: _____

Cell # (Primary): _____

Cell # (Secondary): _____

Email (Primary): _____

Email (Secondary): _____

Florida Property Information

Address: _____
Community: _____

Street: _____ Unit: _____

City / State / Zip: _____

Unit Phone #: _____

Mail Box #: _____

Total Square Footage: _____

of Bedrooms: _____

of Bathrooms: _____

Gate Code: _____

Lock Box Code: _____

Entry Door Code: _____

Garage Code: _____

Alarm & Video Surveillance System Information

Alarm Keypad Code: _____

Safe Word: _____

Company: _____

Phone #: _____

If you have an activated alarm system in your home, please do not forget to register Roger Myers Professional Property Services, LLC with your alarm company.

Property Video Camera: Yes / No (circle)

Reset camera, router, or modem: Yes / No (circle)

Number of Cameras: _____

Location of Cameras: _____





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Utility Information

Water Turn On/Off (Outside) Location: _____

Water Turn On/Off (Inside) Location: _____

Water Heater Location(s): _____ Electric / Gas / Tankless (circle one)

Electric Breaker Box Location(s): _____

Thermostat Temp. (Away): _____ # of Thermostats: _____ Location(s): _____

Humidistat Temp. (Away): _____ # of Humidistats: _____ Location(s): _____

A/C Filter Size/Location(s): _____ Air Handler Location(s): _____

Trash Pick-up Day(s): _____ Recycling Pick-up Day(s): _____

Community Association Management Company Information

Company: _____ Contact Person: _____

Community Manager: _____ Phone #: _____

Gas Company Info

Company: _____ Contact Person: _____

Phone #: _____

Air Conditioning Maintenance Information

Company: _____ Contact Person: _____

Phone #: _____

Lawn Care Information

Company: _____ Contact Person: _____

Phone #: _____

Pest Control Information

Company: _____ Contact Person: _____

Phone #: _____

Pool/Hot Tub Information

Company: _____ Contact Person: _____

Phone #: _____



