

Big Hickory HomeWatch

Client and Property Profile

Owner(s)

Florida Address:

Other:

Email:

Billing Name:

Billing Address:

Local Contact Information – Person(s) with access to your home-watch

Name:

Phone:

Other:

Emergency Contact Notification

In the event the homeowner is unavailable during an emergency, the following person will be contacted. This person has the authority to make a decision on behalf of the homeowner.

Contact:

Phone:

Email Address:

If there is an emergency, and homeowner and emergency contact person is unavailable, do you authorize Big Hickory Home Watch to temporarily repair or stabilize the situation at the homeowner's expense? **YES / NO**

OPTIONAL:

Credit Card on File. Used only for an emergency or client approved charges.

Card Number:

Expiration Date:

Security Code:

Name on Card:

Signature:

Property Information

Alarm Company and Phone:

Security Code, Password, Procedure:

AC Setting:

Water Main to Home: ON _____ OFF _____

Water Main Location: _____

Water Heater(s): ON _____ OFF _____

Breaker Box Location: _____

Irrigation Settings:

Hurricane Shutters:

AC Filter Size:

Service Provider Information

AC Company: _____ Do you have a service contract? YES NO

Homeowners Association: _____

Security Gate: _____

Cleaning Service: _____

Pool Service: _____

Plumber: _____

Pest Control: _____

Electrician: _____

Handyman: _____

Lawn/Landscape: _____

Trash and Recycle Days: _____

Other: _____

Preferences or Special Requests: _____

Car Drive Authorization

Name of Vehicle Owner:

Car Year, Make & Model:

License Plate Number:

Parking Space Number:

Car Drive Frequency:

\$25.00 per drive. Gas, Oil Change, and Car Washes are additional

Insurance Company:

Policy Number:

Bodily Injury/Property Damage Liability Limits:

Collision Deductible:

I affirm that I will retain these limits during the entirety of my policy: (initial)

I authorize a representative(s) of Big Hickory Home Watch LLC to drive my vehicle as agreed. The vehicle is insured and I understand the any claim would be filed on my personal automobile policy. If required by my insurance company, BHHW will be listed as a driver on my policy.

I the vehicle owner, am solely responsible for all required maintenance, proper licensing, and registration.

BHHW will assist when requested and appropriate Concierge Fees will apply.

Signature:

Date:

Printed Name of vehicle owner:

Registration and insurance card must be kept in vehicle.