

CUSTOMER INFORMATION							
OWNER			OCCUPATION		CHARGE/VISIT		
ADDRESS			CITY	ZIPCODE	VETERINARIAN		
PHONE (HOME)		PHONE (WORK)		LOCAL CONTACT WITH KEY		PHONE	
PERSON TO BE CONTACTED IF MAJOR HOUSE PROBLEM				PHONE NUMBER WHERE YOU CAN BE REACHED WHILE AWAY			
HOUSE INFORMATION							
DIRECTIONS TO HOUSE							
SUPPLIES							
TRASH / DAY	PLANTS	MAIL / PAPER	A/C-HEAT	LIGHTS			
CARS	WINDOWS	SHADES / BLINDS	OTHER				
ALARM CODE		ANSWER PHONE?		RETRIEVE ANSWERING MACHINE MESSAGE?			
NO. 1 PET INFORMATION							
NAME		SEX	N	UN	AGE	BREED / DESCRIPTION	
A.M. DIET			P.M. DIET				
MEDICAL HISTORY			SHOTS CURRENT?		VACCINATION DUE DATE		
MEDICATION			HOW GIVEN?				
TOILETING / EXERCISE			LITTER BOX ROUTINE				
BEHAVIOR / HABITS			HISTORY OF AGGRESSION				
NO. 2 PET INFORMATION							
NAME		SEX	N	UN	AGE	BREED / DESCRIPTION	
A.M. DIET			P.M. DIET				
MEDICAL HISTORY			SHOTS CURRENT?		VACCINATION DUE DATE		
MEDICATION			HOW GIVEN?				
TOILETING / EXERCISE			LITTER BOX ROUTINE				
BEHAVIOR / HABITS			HISTORY OF AGGRESSION				
OTHER INFORMATION							
ADDITIONAL ANIMALS - BIRDS, AQUARIUMS, HAMSTERS, ETC.							
WILL ANY OTHER PERSON HAVE ACCESS TO OR BE VISITING YOUR HOME IN YOUR ABSENCE?			YES	NO	IF YES, NAME		PHONE
KEY RECEIVED?	CHECKED TO BE SURE IT WORKS?		WHICH DOOR?		HOW IS IT TO BE RETURNED?		BACKUP KEY
HOW DID YOU HEAR ABOUT OUR PET SITTING SERVICE?							
I HAVE READ THIS INFORMATION AND AGREE THAT IT IS CORRECT.							
OWNER			DATE		PET SITTER		