

Little Love Pet Sitters

551-221-0707

littlelovetitters@gmail.com • www.littlelovetitters.webs.com

~~~~ Client Information ~~~~

CLIENT INFORMATION

Client(s): _____

Address: _____ Zip: _____

Home: _____ Cell: _____ Work: _____

Additional phone numbers: _____

Email Address(s): _____

Other: _____

TRAVEL INFORMATION

Date leaving: _____ Time leaving: _____

Date returning: _____ Time returning: _____

Flight information: _____

Contact Information: _____

E-mail address while away: _____

Emergency contact name: _____ Phone: _____

Does this person have a key to your home? Yes No

Will anyone else be in your home during your absence? _____

Others who have keys to your home: _____

HOME CARE INFORMATION

(Circle all that apply)

Bring in mail Bring in paper Alternate lights Open/close curtains Set trash cans out

Television or radio Water plants Thermostat

Instructions:

LOCATION OF IMPORTANT ITEMS

Leash/cat carrier/crate: _____
Pet Food: _____
Cleaning supplies: _____
Vacuum cleaner: _____
Thermostat: _____
Breaker Box: _____
Alarm panel: _____
Indoor/outdoor light switches: _____
Other: _____

HOME INFORMATION

Please let us know if there is anything out of the ordinary that we should know about your home (i.e. doors that stick, toilets or drains that don't work properly, etc.)

KEYS

Business prefers to keep client keys on file to simplify arrangements for future visits. Scheduling key pick-ups and returns will incur extra charges.

_____ I release my house keys to business to retain on file, in a secured location, for future services. I may revoke this release at any time, at which time my keys will be returned.

_____ I give business permission to permanently mark my key(s) for identification purposes.

_____ I would like business to return my house keys after the current service is completed. I understand there will be a \$10 charge for key pickup for future services.

Client Date

Client Date Business Date

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~~~~ Pet Information ~~~~

Pet's name: _____ Age: _____ Male / Female Spayed / Neutered
Type of pet: _____ Breed: _____ Shots _____
Is pet micro-chipped? YES NO Chip #: _____
Registry company: _____
Feeding instructions: _____
Exercise/play: _____
Health concerns: _____
Medications: _____
Favorite games/toys: _____
Hiding places: _____
Indoor/outdoor instructions: _____
Any behaviors or problems to be aware of: _____

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Client

Date

Business

Date

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~~~~ Veterinary Release ~~~~

VETERINARIAN

Hospital and Vet's Name: _____

Address: _____

Phone: _____

To the Hospital:

Little Love Pet Sitters has been contracted to pet sit for my pet(s) and has my permission to place them in your care in case of an emergency. Little Love Pet Sitters will attempt to contact me as soon as medical care is deemed necessary. However, in the event I cannot be reached immediately, I authorize you to treat my pet(s) and will be responsible for payment of any fees as stated below. **Please file this form with my records.**

Pet Owner: _____

Address: _____

Phone: _____

Pet(s): _____

1. If above named veterinarian is not available, I agree that another vet in his/her practice may care for my pets. If neither of these veterinarians are available, I give permission for Little Love Pet Sitters to take my pet(s) to the nearest animal hospital or emergency clinic.
2. I give permission for Little Love Pet Sitters to approve treatment up to \$_____. (_____ initial)
3. I understand that Little Love Pet Sitters assumes no responsibility for the loss of any pet and is released from all liability related to transportation, treatment and expense.
4. Other conditions, if any: _____

My pet(s) has/have the following health issues: _____

This consent for treatment has no expiration date unless otherwise noted.

Client Date

Client Date Business Date

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~~~~ Client Information ~~~~

This contract is an agreement between

Little Love Pet Sitters

and _____ (Client)

for pet care services beginning on _____ and thereafter on an as-needed basis.

PET CARE AND PAYMENT

1. Pet care services will be provided at the following rate: \$ _____
Rates for subsequent services are subject to change.
2. Client authorizes Little Love Pet Sitters to perform pet care services as outlined in Client Profile, Pet Profile, and Veterinary Release, which shall become part of this contract. Prior to any future pet care services Client agrees to notify Little Love Pet Sitters of any changes to the information on these forms.
3. Emergency care: In the event that pet(s) being cared for require immediate medical attention, Little Love Pet Sitters will attempt to contact the Client prior to obtaining emergency care. However, Client agrees that pet sitter has the authority to act in pet's best interest even if this means seeking medical attention prior to notifying Client.
4. Inclement weather/Natural disaster: In the event of inclement weather or natural disaster, Little Love Pet Sitters is entrusted to use best judgment in caring for pet(s) and home. Client recognizes that in the event of inclement weather or natural disaster, Little Love Pet Sitters reserves the right to alter services outlined in this contract.
5. Personal emergency: In the event of personal emergency or illness of pet sitter, Client authorizes Little Love Pet Sitters to arrange for another qualified person to fulfill agreed upon responsibilities as set forth on this contract. Client will be notified in such case.
6. Key return policy: Client may agree to allow Little Love Pet Sitters to keep their keys on file in a secure location for future services.
7. Locksmith: Client gives Little Love Pet Sitters the authority to use the services of a locksmith in the event of malfunction of the lock, keys, or automatic door opener. Client also agrees to reimburse Little Love Pet Sitters within 7 days of return for all costs incurred, and to hold Little Love Pet Sitters harmless for consequences related to the activities of the locksmith.
8. Payment: Client agrees to make payment in full prior to, or at the time of, the first visit.
9. Extra Services: Any charges for unplanned services will be due within 7 days of completion of service engagement. Invoice for additional charges (including receipts) will be left at Client's home upon completion of service engagement.

(_____ initial)

10. Confirmation: Client agrees to call Little Love Pet Sitters office prior to leaving to confirm departure day/time, and again upon returning home to let us know that pets are safe. If Client expects to arrive home earlier or later than planned, Little Love Pet Sitters must be notified as soon as possible.
11. Cancellation: Little Love Pet Sitters requires a 24-hour notice of cancellation. Less than 24-hour notice will result in Client being billed for 50% of the fee for booked services.

LIABILITY

1. Little Love Pet Sitters, its employees and/or independent contractors, agrees to provide the services in a caring, responsible manner. The client waives and relinquishes any and all claims against Little Love Pet Sitters, its employees and/or independent contractors, except those arising from negligence of the pet sitter. Client agrees to notify Little Love Pet Sitters of any concerns related to agreed upon services within 24 hours of return home.
2. Emergency contact: Client agrees to provide Little Love Pet Sitters with contact information where he/she can be reached while away. Client will also provide a name and phone number of someone who is authorized to handle any major problems that may arise. If Client or designated contact person cannot be reached in a timely manner, Client agrees to accept any decision Little Love Pet Sitters makes in regards to pet care or Client's property.
3. Visitors: If anyone will be entering Client's home while it is under our care, Client agrees to notify Little Love Pet Sitters in advance. Little Love Pet Sitters will not enter an occupied home if we have not previously made us aware of visitors. Similarly, unless we receive instructions from Client, we will not grant access to the home to any visitors. Little Love Pet Sitters will not be held responsible for any damages incurred to Client's home or pet(s) by visitors. It is understood that anyone with access to the home will be notified of Little Love Pet Sitters presence and vice versa. The police will be called, without exception, on all intruders or suspicious acts.
4. Outdoor access: Little Love Pet Sitters will not be held liable for the well being or actions of any pet with unsupervised access to the outdoors.
5. Aggressive pets: If a pet has a history of biting or other aggressive behavior, Little Love Pet Sitters reserves the right to refuse or cancel service. The owner will be liable for the pet sitter's medical expenses and/or damages that are the result of an animal bite or injury due to pet's aggressive behavior.
6. Vaccinations: Client agrees to provide Little Love Pet Sitters with proof of current vaccinations for all pets. Should pet sitter be bitten or otherwise exposed to any disease or ailment received from Client animal(s), Client agrees to pay all costs and damages incurred.
7. Future Services: Client authorizes this signed contract to be valid for future services without additional signed contracts or written authorization.

The Client states that he/she has read this entire agreement, and understands and agrees to its terms and conditions.

Client _____ Date _____

Client _____ Date _____ Business _____ Date _____

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~~~~ Cost Estimate ~~~~

Client: _____ Date: _____

Date(s) of service: _____

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Cost/visit: \_\_\_\_\_ X # of visits: \_\_\_\_\_ = \_\_\_\_\_

Additional fees: \_\_\_\_\_

\_\_\_\_\_

Total: \$ \_\_\_\_\_

Payment may be made by cash or check and is due on or before the first scheduled visit.

Estimate is based on agreed upon details as set forth in contract and pet profile forms. If additional services are requested or incurred during service period, client will be billed and amount will be payable within 10 days of billing date.

Please make checks payable to business owner "Desirea Johnson".

*Thank you for allowing Little Love Pet Sitters to care for your loved ones in your absence!*