

Paws at Home Client Profile

Client Name: _____

Address: _____

City: _____ Zip Code: _____ Wk Phone _____

H Phone _____ Mobile Phone / Pager _____

Other _____ E-mail Address: _____

Daily updates? Yes No How preferred? _____

Do you own or rent your home? Own Rent If renting, landlord's name and telephone #
(in the event of emergency) _____

<u>Emergency Contact</u>	<u>Relationship</u>	<u>Telephone</u>	<u>Key ?</u>
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Does **anyone** else have access to your property during your absence (housekeeper, gardener, pest control, relative or friends)? _____

Location of Main water turn off _____

Location of electrical panel box _____

Do you have homeowner / liability insurance that would cover your home in an emergency, or

Injuries caused, in the event of bites, scratches, mauls, etc.? Yes No

If yes, who is your carrier and agent? _____

Is there a WEAPON in the house? Y N Which car/truck will be at home? _____

Location of pet food / treats / can opener: _____

Location of cleaning supplies extra paper towels: _____

Location of the inside and outside trash Inside _____ Outside _____

Would you like (Company Name) to bring in mail / newspapers? Yes No - is your mailbox locked? Yes No

If Yes, where is the key? _____ Box # _____

Adjust lighting Yes No Adjust Window coverings Yes No Radio/TV Yes No

Water Plants Yes No Take garbage out - When _____

Do you have a security system? Yes No Advise Company you are using our service!

Name of Security Service _____ **Phone** _____

Entry: _____ Exit Code: _____ Password: _____ Location _____

Where is the nearest phone? _____

Miscellaneous Instructions _____

KEYS: Keep for future visits Return

Due to security concerns Paws at Home will **NOT** leave keys locked inside your home.

Please notify us upon your return to avoid additional fees for additional visits.

Client Signature

Date

Paws at Home representative

This signed document is authorization to enter the above address for the purpose of pet care or home security checks.