

Donna's Pet Sitting

fostermomtokitties@gmail.com

226-988-5094 (Cell)

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## Home Information & Key Release

Client Name: \_\_\_\_\_

Please fill out this information below so we know how to care for your home while you are away. The Pet Sitter will not answer the telephone or the door while in your home.

### Other people in your home

Who else has access to your home (maid, relatives, neighbours, landlord, etc.)?

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Who may be in the home while service is being provided?

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### Security Systems

Do you have an alarm system?   YES                      NO

Where is it located?

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How is it activated/deactivated? (Include Alarm Company contact number)

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### Home Care

Are there any rooms off-limits to people or pets?

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Where are the cleaning and first aid supplies?

Where are the breaker/fuse box and any new fuses, thermostat, main water shut-off valve, gas shut-off valve and fire extinguisher?

Water indoor plants? YES NO

How many, location, when to water each of them, what frequency?

Bring in newspapers? YES NO Where to place it? _____

Bring in mail? YES NO Where to place it? _____

Key Release

I authorize the Pet Sitter to use my house key(s) during the time she will be caring for my pet(s). The Keys will be delivered to the Pet Sitter upon signing of the agreement and will be delivered back to the Client once they are back to their home at a pre-arranged date.

Signature

Date