

All Animal Pet Care, LLC – Owner/Pet Contract
ALL INFORMATION MUST BE COMPLETED

Owner Information: _____ **DATE:** _____ **email:** _____

Name: _____

Spouse/Partner: _____

Address: _____

City/Zip: _____

Home Number: _____

Cell Number(s): _____

Cell Number(s): _____

This section applies only if you have an alarm and/or Keypad to enter home:

Alarm Code to enter house: _____ **Instructions to enter home:** _____

Instructions to leave the home: _____

Temporary PC (if alarm should go off): _____

(Make sure you notify Alarm Company we will be pet sitting)

Alarm Company/Number: _____

Garage Code on garage door if you use one: _____

Water shut off location: _____

What are your preferred times for visits: (overnight visits begin 6:30PM the night before through 6:30AM the next morning)

Emergency Contacts: REQUIRED *See Note Below

In the event of inclement weather or a personal emergency should All Animal Pet Care, LLC not be able to get to the client's home (this must be a neighbor with a key to access animals. They also need to be home and not on vacation):

Name/Contact(s) number(s) _____

Address: _____

.....

In the event All Animal Pet Care, LLC cannot reach you, in the event of an emergency situation (this must be a relative/friend):

Name/Contact(s) number(s): _____

Address: _____

In the event of a household emergency (such as water leak, malfunction of a/c – heating unit, etc.):

Name of repair contact: _____ Phone Number: _____

Note: If you do not have a neighbor with a key so they have access to your pets while you are away, All Animal Pet Care, LLC **has the right to decline services**. This is for the safety of your pets, should we have inclement weather and we cannot get to your pet(s). When you depart for vacation your neighbor must be at home and available for me to contact while you are away. They cannot be on vacation the same time you are.

I have read and agree to provide All Animal Pet Care, LLC with an emergency contact who is a neighbor with a key and who will be home while I/we are out of town.

_____ Print Name _____ Date

_____ Signature

Pet Information: (NOTE: one sheet PER PET...please make copies)

Pet's Name: _____ Male/Female Age: _____

Breed/Description (ex: color/markings): _____

Phobias/Issues: (Aggression with dogs in home/dogs outside of home? Thunder storms? Walking in the rain? Sensitive to the heat, etc.) Would really appreciate as much info as possible so I have no surprises.

Health Problems: _____

Medications - dosage/when to give/how to give:

Medication location: _____

Feeding (how much food/what time do you want your pet(s) fed): _____

Food location (where the food is kept): _____

Food Bowl/Water Bowl location: _____

Treat location and how often can they have a treat: _____

Litter Box location and extra litter, bags to clean litter, etc.

Proof of Rabies required: (Date of last Rabies shot/ID Number): _____

Pet Microchipped? Y / N Is microchip information up-to-date? Y / N (info must be updated prior to departure).

If your pet requires leash walks he/she must have a tag on the collar with CURRENT emergency contact info (this is required).

****ALL medications (human and animal) should be kept in a safe place where pets cannot reach them (they should be kept in a cabinet up on a high shelf...example of where they should NOT be kept is on a lower shelf of a pantry should that pantry door be left open by accident). All Animal Pet Care, LLC cannot be held responsible should you have ANY medications pets can get too that would cause sickness or death.****

I acknowledge that by signing this document the above information provided about my pet is true and if **any information should change regarding my pet(s) I will inform All Animal Pet Care, LLC.**

The client agrees to waive any claims against All Animal Pet Care, LLC unless All Animal Pet Care, LLC is negligent and does not perform as agreed herein.

_____ Print Name _____ Date

_____ Signature

All Animal Pet Care, LLC

VETERNARIAN RELEASE FORM

ONE PAGE PER PET if information is not the same

PETS NAME: _____

This form will be retained on file and will be used to authorize veterinary treatment in the event that your pet(s) require treatment during your absence, and we are unable to contact you at the time. Should you change veterinarians please notify All Animal Pet Care before service dates.

Your Name: _____

Address: _____

City: _____ ZIP: _____

Home phone: _____ Work phone: _____

Cell: _____ Other: _____

To whom it may concern: During my absence a representative of All Animal Pet Care, LLC will be caring for my pet(s). I give All Animal Pet Care, LLC my permission to transport my pets to my veterinarian (or to an emergency clinic). In the event I cannot be reached, I authorize All Animal Pet Care, LLC to act as an agent on my behalf regarding my pet(s) medical care. I accept full responsibility for charges incurred in the treatment of my pet(s), not to exceed the following amounts:

Indicate Amount here: _____

All Animal Pet Care, LLC reserves the right to utilize the services of any available veterinary clinic. If time permits, we will attempt to utilize your primary veterinary clinic. If it is not practical to do so, the following information will be helpful if the clinic we utilize requires documentation from your primary clinic.

Veterinary Clinic: _____

Address: _____

City: _____ Zip Code: _____

Phone: _____ Emergency Phone: _____

I authorize veterinary treatment for my animal(s) during my absence. I understand that All Animal Pet Care, LLC assumes no responsibility for the loss of any pet and is released from all liability related to transportation, treatment and expense. I will be responsible for any and all charges incurred during the treatment of my pets limited to the conditions of this authorization.

In the event of the death of my pet and I am unable to be reached, I request the following to be done:

Pet Owner Signature: _____ Date: _____

All Animal Pet Care, LLC _____ Date: _____

Emergency Pet Guardianship Documentation

Client's Name: _____

Name of pet(s): _____

In the unlikely event that you are unable to return and assume care of your pet(s), please list the name of the person(s) All Animal Pet Care, LLC should contact to take over the care of your pet(s) until final pet guardianship is determined by arrangements made in your will or other legal documents.

Please be sure that you have notified the person(s) below that you have listed them as your emergency pet guardianship contact and that All Animal Pet Care, LLC has been given their contact information.

Name: _____

Address: _____

Home phone: _____ Cell phone: _____

Relationship to you: _____

Pet owner's signature

Date

Location of:

Leash (if applicable): _____

Cleaning Supplies/Rags: **Please have rags** available, (especially on carpet, hard to clean w/paper towels):

Bags (for cleaning litter box or poopie scooping): _____

Location of outside trash: _____

What day do you put trash to the curb: _____

What day is the actual trash pick-up: _____

Location of pet crate (s) (in case of an emergency): _____

Do you require: plant watering, alternate lights/blinds, mail/paper brought in, poopie scooping, etc.: **(Note: there may be a fee for lawn/plant watering depending on how much there is to water).**

Wireless password (**for overnight visits only**) – sometimes we need to access our laptop for business purposes: _____

Key Policy: The client is to provide to All Animal Pet Care, LLC with a functional keys at the time of the consultation. All Animal Pet Care, LLC will not hide or pick up keys outside of the dwelling. **The client is responsible for making certain that all keys work properly.** If you do not agree to the key policy, there is a \$15.00 fee to pick-up and return keys (\$15.00 each way).

*****Not responsible for any keys left outside*****

Security Key Agreement: The client agrees to provide All Animal Pet Care, LLC **two keys** to their home to retain for future services. All Animal Pet Care, LLC agrees to retain the keys in a safe/secure location. All Animal Pet Care, LLC will only use personal house and mailbox key(s) for pet sitting services only.

In the event All Animal Pet Care, LLC is unable to access the home during pet care due to an inoperable key, we will utilize every resource available to gain entrance in order to ensure the pet(s) well-being. The client will be responsible for all costs incurred including but not limited to a locksmith as well as All Animal Pet Care, LLC at a rate of \$20 per hour.

Pet Owner Signature: _____ Date: _____

All Animal Pet Care, LLC Signature: _____ Date: _____

Contract Terms:

Payment is due on or prior to date of visit. Balances not paid in full by 7 days following the last visit will be charged a 10% late fee in addition to original payment that is owed. There will be an additional \$35.00 charge for returned checks and payment will be expected in cash thereafter.

Scheduled Visits for re-occurring weekly clients: No refunds for failed cancellations prior to arrival for service, whether service is performed or not.

Early Return Policy: There are no refunds or credits for early returns/or last minute changes. There will be exceptions to inclement weather only.

At no time will All Animal Pet Care, LLC waive any fees. You are required to pay the visits plus the holiday fee(s). There are no discounts when booking several visits at one time. We do have a referral program. One free visit for each referral that actually books a visit with us.

All Animal Pet Care, LLC agrees to perform services in accordance with the instructions contained herein. The client agrees to waive any claims against All Animal Pet Care, LLC unless All Animal Pet Care, LLC is negligent and does not perform as agreed herein. **If the owner desires to make any changes in accordance with the performance of pet care, the instructions must be agreed to in writing** or the changes will be at the sole discretion of All Animal Pet Care, LLC. The owner agrees that all information on this contract is accurate. The owner agrees to utilize All Animal Pet Care, LLC with the terms and conditions of this agreement and all attachments. **The owner further agrees that All Animal Pet Care, LLC cannot be held liable in the event other persons will be in the client's home during the scheduled dates of pet sitting.**

Pet Owner Signature: _____ Date: _____

All Animal Pet Care, LLC Signature: _____ Date: _____

All Animal Pet Care, LLC – Pet Sitting Guidelines and Policies

- ✓ **Pet Sitting Services** Overnight visits begin 6:30PM through 6:30AM the following day. There will be occasions we may have other pet sitting jobs to do while we are doing overnights, therefore we may have to accommodate those requests and leave the overnight job for a short time and then return. Regular hours of service are 6:30AM – 9:00PM, 7 days a week.
- ✓ **Visit times** Daily visit times will be as close to the requested times as possible. However, if pet sitting for more than one client, the times may vary. We ask you allow a one (1) hour window. Inclement weather may cause us to cut visits shorter due to having to get to many pets and travel conditions.
- ✓ **Duration between visits**–All Animal Pet Care, LLC will not leave any dog alone for more than 10 hours at a time. Cats will not be left for more than 48 hours.
- ✓ **Additional Scheduled Services** – if you have any other scheduled services coming to your home while we are pet sitting (such as pest control service, cleaning service, etc.) All Animal Pet Care, LLC will not be liable for any damages, theft or problems that may incur to your home or pets. **Please inform us any time we are scheduled to pet sit if you have any scheduled appointments other than All Animal Pet Care, LLC.**
- ✓ **Pet Emergency** – Should we need to take your pet to the vet there is a **\$20 per hour extra fee.**
- ✓ **Vaccinations** – All Animal Pet Care, LLC requires all your pet(s) to be **current with rabies shots.**
- ✓ **Leashes** – All dogs will be required to be on a leash at all times while they are outside. It does not matter if your dog is trained to be outside without a leash (unless it is a fenced in area).
- ✓ **Fences** – All Animal Pet Care, LLC does not accept responsibility or liability for any client’s pet(s) that escapes or becomes lost or injured, fatal or otherwise, when instructed to use or leave the client’s pet(s) in a fenced in area including electronic, wood, metal or any other type of fence. This includes free roaming with doggie doors.
- ✓ **Other pets** – We will not permit your pet(s) to interact with other animals. If a stray animal that is off leash approaches, we will do our best to keep the interaction to a minimum and move away. If the other pet should be aggressive and harm your pet, All Animal Pet Care, LLC will not be held liable for any injury incurred to your pet.
- ✓ **Animal Behavior** – Animal behavior can be unpredictable. All Animal Pet Care, LLC does not accept responsibility or liability for animal behavior, normal or otherwise, which results in injury to the client’s pet(s). Further, if an All Animal Pet Care, LLC provider is harmed and/or injured by the client’s pet(s), the client/owner accepts full responsibility for the cost of any necessary medical attention required.
- ✓ **Unforeseen purchases** – All Animal Pet Care, LLC will purchase pet food, litter, or other necessary items that contribute to the health and well-being of your pet(s) while you are away if we run out of items needed. We will retain a receipt and the pet owner is responsible for reimbursement of those items. In addition, a **\$20 trip fee** will be charged to the pet owner.
- ✓ **House Cleanliness** – All Animal Pet Care, LLC will clean up after your pet(s) to the best of our ability. If there are accidents above and beyond the normal amount anticipated, All Animal Pet Care, LLC will not be held responsible and an additional charge may incur for extra time for clean-up.
- ✓ **Household Emergencies** – If there are any household emergencies while All Animal Pet Care, LLC is pet sitting, extra charges will incur to compensate your pet sitter for time spent at your home while contacting emergency repair personnel and waiting while the repairs have been made. This includes but is not limited to; leaking pipes, malfunctioning water heaters and heating and a/c units. The fee will be **\$20 per each hour** we have to stay at your home while repairs are being made or waiting for any repairman.
- ✓ **Thermostats** – Please leave your thermostat settings within normal comfortable range. If the house temperature is outside of a comfortable range, All Animal Pet Care, LLC will adjust the thermostat.
- ✓ **Mail/Packages** - All Animal Pet Care, LLC will not be held responsible for any mail/packages left after visits (if times requested of visits are after mail/package deliveries). Mail/packages will be brought in the next day of the visit. We will not sign for any packages.
- ✓ I agree to comply with the statement on the contract to provide a neighbor with a key and access to the pet(s) in the event of inclement weather. I also agree that this neighbor will be at home and not on vacation while I/we are away. I agree I/we will not hold All Animal Pet Care, LLC liable for any unsatisfactory conditions with your home/pet, theft, damage to your home, etc. should the need arise to call upon the neighbor.

I _____ have read, understand and agree to the guidelines and policies of All Animal Pet Care, LLC. I further understand that a copy of this form will be kept on file for documentary purposes. All guidelines and policies are subject to change at the discretion of All Animal Pet Care, LLC.

Pet Owner Signature _____ Date: _____

All Animal Pet Care, LLC Signature _____ Date: _____