



## Household Information

Client Name:						
Home Phone:		Cell Phone:		Work Phone:		
Address:			City:		State:	Zip:
Spouse/Partner:						
Home Phone:		Cell Phone:		Work Phone:		
Referred by:						
Do you own or rent your home? Own ___ Rent ___					Landlord/Mgmt Phone:	
Email & Texting OK? Yes ___ No ___				Email Address:		



## Emergency Contact Information



Name	Relationship	Phone	Key(s) to home?
			Yes ___ No ___
			Yes ___ No ___



## Home Access



Will you be providing a key to Kathy's Pupper Doodles to keep on file? Yes ___ No ___
---

This is beneficial in the event you ever lock yourself out, for a \$10 fee I will come to unlock your house for you; or for last minute drop-in visits if you're working late or have an emergency come up and can't get to your fur babies in time.



## Security System



Company Name:		Code Word:	
Company Phone:		Security Code/Number:	

(over)



Please list the location of the following items.



Leashes:	Broom/Mop:	Pet Carrier:
Collars:	Cleaning Sprays:	Meds/Vitamins:
Dog Towels:	Cleaning Towels:	Fire Extinguisher:
Cat Litter:	Litter Box:	Trash Bags:
Treats:	Food:	Water Shut-Off Valve:
Toys:	Outdoor Garbage:	Electical Panel Box:



### Instructions



Bring in mail? Yes ___ No ___	Location of mailbox / key:
Alternate Blinds? Yes ___ No ___	Water indoor plants? Yes ___ No ___
Alternate Lights? Yes ___ No ___	Turn on/off Radio/TV? Yes ___ No ___



### Additional Notes or Comments

