#  *Angel’s Pet Sits* – *Home Guide*

### Client / Owner Name:

###

## Location

Poop scoop + bin

Paper towels

Vacuum

Bags

Outside waste

Recycle bin

Kitchen waste

Vacuum

Broom

Spot cleaner

Towels

Notebook

TV / radio on

Lights on

Other

##### Snow & ice instructions

##### Vehicles & Visitors At Home

## Key – MUST TEST

[ ] Pet sitter has [ ] Use code

[ ] Will mail [ ] Unlocked

[ ] Drop off [ ] Client present

[ ] Will leave [ ] Other

### Describe key / Other entry methods:

### Backup entry:

##### Notes & Misc

## Internal use only

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Contact date / time: Method:Consultation date / time: First sit date:Service Type: ☐Daily ☐Vacation ☐Weekly ☐PeriodicBilling frequency: ☐Weekly ☐Monthly | Usual visits:

|  |  |  |
| --- | --- | --- |
|  | Length | Timeslot |
| AM |  |  |
| Noon |  |  |
| Dusk |  |  |
| PM |  |  |

Travel: $\_\_\_\_ Miles\_\_\_\_\_ Minutes\_\_\_\_ |