

# Carol's Creature Care

## Licensed and Insured

1934 Jordan Springs Road, Stephenson, VA 22656  
(540) 722-4555 Fax (540) 722-3648 Mobile (540) 539-5914

## Service Contract

Dates of Service: \_\_\_\_\_ to \_\_\_\_\_  
Start Date End Date

CCC agrees to provide pet care in your home or office by providing:

- Individual, loving care for your pet, to include attention, affection and love.
- Fed as close to specified time as possible. Fresh water provided.
- Exercise, playtime and walks.
- Waste pick-up on all walks
- The following special requests: \_\_\_\_\_  
\_\_\_\_\_

Do you wish to have:			Any Special Instructions
Mail/Newspapers brought in	Y	N	_____
Plants/Flowers watered	Y	N	_____
House lights on or off	Y	N	_____
Radio/TV on or off	Y	N	_____
Home Security Check	Y	N	_____

Others authorized to be in house: \_\_\_\_\_

**Client** agrees to provide payment for services prior to departure, all food and snacks for pets use, reimbursement for any items needed by pet during owner absence, a key to house (mail box, security service as needed).

**Client** further agrees that pet sitter may take pet to veterinarian for any emergency care needed and further agrees that the owner will pay for any veterinary services.

Veterinarian: \_\_\_\_\_ Phone Number: \_\_\_\_\_

CCC is authorized to care for pet during owner absence

**Client** agrees to call me upon their return home (if you do not call and I make a visit, you will be charged for that visit).

Do you want CCC to keep an extra key on file for unscheduled visits in case of any unforeseen absence? \_\_\_\_\_

Key Received: \_\_\_\_\_ Date \_\_\_\_\_

Client Signature: \_\_\_\_\_ Date \_\_\_\_\_

CCC Signature: \_\_\_\_\_ Date \_\_\_\_\_

CCC is responsible for pet care only. CCC is not responsible for damages to property or home beyond my control.

Client Signature: \_\_\_\_\_ Date \_\_\_\_\_

Thank You for Your Business