



## Paw Plus Pet Sitting Inc. – Service Request

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Pets

Client Full Name   
 Best Way to Contact today   
 Contact At

Service Begins  Time  Daily  Every Other Day  Weekdays   
 Service Ends  Time

Details	Visit Time	Length	Rate	Travel Fee	Cost/Visit	# of Visits	Total
Morning			+		X	=	
Afternoon			+		X	=	
Dusk			+		X	=	
Night			+		X	=	
Subtotal							
Additional Charges							
Discounts							
Grand Total Deposit Due							

### How may we reach you while you are away?

Phone:   
 Email:

### Trip Description/Notes &Visitors Expected

### Tasks

<input type="checkbox"/> Daily Log	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/> Walk Dog	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/> Feed	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/> Medicine	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/> Plants	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/> Clean Litter Box	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/> Take Out Trash	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/>	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/>	<input style="width: 130px; height: 25px;" type="text"/>
<input type="checkbox"/>	<input style="width: 130px; height: 25px;" type="text"/>

### Special Notes & Other Tasks

Payment Method

Pay Date

**Payment is Due when service starts**

This request **must be confirmed** by my pet sitter, and a signed copy must be left for the pet sitter

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

