

CREETURE COMFORTS LLC
201 Great Pond Rd.
Simsbury CT 06070
AGREEMENT FOR PET/HOUSE SITTING SERVICES

Creature Comforts, LLC (Creature Comforts) provides high quality in-home pet and house sitting services, as well as limited boarding facilities, to residents of Connecticut's Farmington Valley. As an insured, bonded limited liability company, Creature Comforts LLC and its representatives have the experience and the passion to provide loving, secure care to dogs, cats, birds, fish and a variety of other household pets. In addition, we offer such services as watering plants, picking up the mail and newspapers, rotating lights, etc. And subject to availability, we can stay overnight at the pets' home.

For the purposes of this contract, the term "Creature Comforts" refers to the limited liability company, its managers, members, agents, employees and independent contractors. The term "client" refers to the pet guardian and/or homeowner who is engaging the services of Creature Comforts. The term "pet" (in both singular and plural forms) means any animal under the care of Creature Comforts. According to the terms set forth herein I, as client, _____, direct Creature Comforts to take care of the family pet(s) identified below and/or our residence located at (address) _____

Release/Waiver

As client, I understand that potential harm could occur in my absence, either to my pet or to my home, while in the care of Creature Comforts. I agree to release and hold harmless Creature Comforts from all liability, including its managers, members, agents and employees, should my pet become lost, injured or otherwise harmed while under Creature Comforts' care; likewise, I release and hold Creature Comforts harmless should my home suffer any damage not due to any negligence on Creature Comforts' part.

I hereby grant permission to Creature Comforts to act in my/our behalf, and in my pet's best interests, by obtaining veterinary care, should Creature Comforts deem it necessary for the health and well-being of my pet. I further agree to pay for/reimburse the cost of any and all veterinary and other reasonably necessary services whose costs may be incurred or borne by Creature Comforts. Further, I attest that my pets are up-to-date on all vaccinations and will provide proof of same. I also attest that my pet does not suffer any life threatening conditions that may be exacerbated by exposure to other pets who may be at Creature Comforts' boarding facility at 201 Great Pond Rd.

Creature Comforts agrees to exercise all due and reasonable care to prevent injury, illness or death to the client's pet and prevent harm to my home in my/our absence. However, in the event of illness, injury or death, or damage to my home, except those caused by reckless or negligent acts on the part of Creature Comforts, the company shall not be liable for such injury, illness or death of my pet, or any damage to my home.

Understanding the risks as stated above, I/we freely and voluntarily enter into this contract, including the release and waiver, with Creature Comforts. This contract is a full and complete instrument. No other warranties expressed or implied are valid unless stipulated above. I/We have read this service contract, release and waiver and understand the contents of this form.

Date _____

Pet/Homeowner [signature]

General Service Description

Pet Services

Creature Comforts agrees to provide the following pet care services (e.g., walk, play with, feed, water) on the dates listed:

House Services

Creature Comforts shall perform the following duties (e.g., water plants, rotate lights, etc):

Payment, Cancellation Policy

In the absence of other arrangements, full payment is due and payable on or before the first day services are rendered. In the event of a default payment or returned checks, client agrees to pay **interest at the rate of 1.5% per month or 18% per year**, plus any collection and attorney’s fees that may be incurred.

Total Estimated Cost\$ _____

Creature Comforts appreciates advance notice of all cancellations. (See Guidelines & Policies for details.)

Veterinary Information

Name of practice/hospital _____

Primary vet's name _____

Address _____ City _____

Phone _____

In the event of a health emergency, Creeture Comforts is permitted to use discretion in seeking veterinary care, preferably to our primary veterinarian, should time allow. If our primary vet is not available, or it is after normal business hours, Creeture Comforts has permission to take my pet to the nearest animal clinic. I understand that I am responsible for the entire cost of care.

Pet Guardian _____ Date _____
(signature)

**PLEASE ATTACH A COPY OF YOUR PETS' MOST RECENT
VACCINATIONS**

Client Profile

Client Name: _____

Address: _____

City: _____ Zip Code: _____ Wk Phone _____

H Phone _____ Mobile Phone / Pager _____

Other _____ E-mail _____

Daily updates? Yes ___ No ___ How preferred? _____

Do you own or rent your home? ___ Own ___ Rent If renting, landlord's name and telephone # _____
(in the event of emergency) _____

<u>Emergency Contact</u>	<u>Relationship</u>	<u>Telephone</u>	<u>Key ?</u>
_____	_____	_____	Yes ___ No ___

Does anyone else have access to your property during your absence (housekeeper, gardener, pest control, relative or friends)? _____

Location of main water turn off _____

Location of electrical panel box _____

Do you have homeowner/liability insurance that would cover your home in an emergency, or if injuries are caused, in the event of bites, scratches, mauls, etc.? Yes ___ No ___

If yes, who is your carrier and agent? _____

Is there a WEAPON in the house? Yes ___ No ___ Which vehicle will be at home _____

Location of pet food / treats / can opener: _____

Location of cleaning supplies extra paper towels: _____

Location of the inside and outside trash Inside _____ Outside _____

Would you like us to bring in mail / newspapers? Yes ___ No ___ Is your mailbox locked? Yes ___ No ___

If Yes, where is the key? _____ Box # _____

Adjust lighting Yes ___ No ___ Adjust window coverings? Yes ___ No ___ Leave on radio/TV? Yes ___ No ___

Water plants? Yes ___ No ___ Take out trash? Yes ___ No ___ When _____

Do you have a security system ? Yes ___ No ___ Please advise security company you are using our service!

Name of Security Service _____ **Phone** _____

Entry _____ Exit Code _____ Password _____ Location _____

Where is the nearest phone? _____

Miscellaneous Instructions _____

KEYS: ___ Keep for future visits ___ Return **Please notify us upon your return to avoid additional fees for additional visits.**

Pet Profile(s)

Pet 1 Name _____ Age ____ Sex M/F Altered Y/N Species _____ Breed _____

Pet 2 Name _____ Age ____ Sex M/F Altered Y/N Species _____ Breed _____

Pet 3 Name _____ Age ____ Sex M/F Altered Y/N Species _____ Breed _____

Food 1: _____

Food 2: _____

Food 3: _____

Type Amount How Mixed Feeding Schedule Where Stored Any other Instructions

Please leave can opener, measuring cups, spoon, fork, medications, paper towels, etc. out.

Favorite Treats, where kept, how often/when given: _____

Favorite Activities / Toys / Words: _____

Medications and instructions to administer: _____

Are vaccinations current? (attach proof) Yes ____ No ____ If no please explain: _____

Attitude toward strangers, **check all that apply:** Excited __ Friendly ____ Aloof ____ Cautious ____

Stressed ____ Scared/Defensive ____ Aggressive ____ Indifferent ____ Other _____

Have any of these pets ever bitten anyone or acted aggressively toward anyone: Yes __ No ____ If yes please explain: _____

Favorite places for dogs to go potty outdoors: _____

How many litter boxes do you use? ____ Where are they located? _____

Where is fresh litter stored? _____ Dispose of used litter: _____

How many times a week do you completely empty the litter box and replenish with new litter? _____

Dispose of dirty litter how: ____ Favorite places cats hide: _____

Any contagious illnesses? Yes __ No ____ If yes provide details: _____

Physical conditions or problems to watch for/be aware of: _____

Please describe your pets' normal eating/exercise routine _____
