



Your Pets' Pal
Pet Sitting & Taxi Services
 (770)905-5083
 www.yourpetspalnow.com

Key Authorization

Client Name(s) _____ Client # _____

Address _____

City _____ State ____ Zip _____ Home Phone _____

Keys: Received? Yes No Tested? Yes No Retain on File? Yes No Date Received _____

Does anyone else have access to your house? Yes No Does this person have a key? Yes No

Name _____ Phone _____ Cell _____

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We require 2 sets of keys. If you are not able to make an additional key, a \$5 fee will be charged for each key made.

A permanent set remains securely at our office for use in case of an emergency. In the unlikely event that **Your Pets' Pal Pet Sitting** is locked out of your house, we will have a spare key and will always be able take care of your pet(s).

Your keys are never marked with your personal information so no one can identify keys with clients. We make every effort to keep your personal information safe and secure.

Client Signature _____ Date _____

Your Pets' Pal Signature _____ Date _____

When services are discontinued or keys are returned to client for any reason , this form will serve as a record of that transaction.

Date Keys Returned _____

Client Signature _____ Date _____

Your Pets' Pal Signature _____ Date _____

Your Pets are Pawsitively Our Top Priority