



Tawnya Roybal

PROFESSIONAL PET SITTING | INSURED & BONDED

Reliable care in the comfort of your pet's own home.
971-317-8055 • trpetsitting@aol.com

PET CARE INSTRUCTIONS & CLIENT PREFERENCES

Complete only the sections that apply to your household and pets.

CLIENT INFORMATION

Client Name: _____

Pet Name(s): _____

FEEDING INSTRUCTIONS

Dry Food Brand: _____

Food Storage Location: _____

Amount Per Feeding: _____

Feeding Schedule: _____

Wet Food Brand: _____

Treat Instructions: _____

MEDICATIONS (IF APPLICABLE)

Medication Name: _____

Dosage: _____

Time(s) Given: _____

Instructions: _____

Medication Location: _____

CAT CARE

Food & Water Instructions: _____

Litter Box Locations: _____

Litter Scoop Frequency: ☐ Every Visit ☐ Daily ☐ As Needed ☐ Other

Litter Storage Location: _____

Favorite Hiding Spots: _____

Additional Cat Care: _____



DOG CARE

Potty Routine: _____

Food & Water Instructions: _____

Poop Scooping Requested? ☐ Yes ☐ No

Scooper Location: _____

Waste Bags Location: _____

Disposal Location: _____

Special Instructions: _____

PET MESS CLEAN-UP

Requested? ☐ Yes ☐ No

Cleaning Supplies Location: _____

Products to Use: _____

MAIL COLLECTION

Requested? ☐ Yes ☐ No

Mailbox Location: _____

PLANT WATERING

Requested? ☐ Yes ☐ No

Plant Locations: _____

Watering Instructions: _____

GARBAGE & RECYCLING COLLECTION

Bin Service Requested? ☐ Yes ☐ No

Garbage Collection Day: _____

Recycling Collection Day: _____

Bins to Curb? ☐ Yes ☐ No

Bins Returned After Pickup? ☐ Yes ☐ No

Bin Storage Location: _____

Curb / Collection Location: _____

Special Instructions: _____

COMMUNICATION PREFERENCES

- Updates:**

☐ Every Visit ☐ Daily ☐ As Needed ☐ None
- Photos:**

☐ Yes ☐ No
- Videos:**

☐ Yes ☐ No
- Preferred Contact Method:**

☐ Text ☐ Phone ☐ Email

ADDITIONAL NOTES