



PRIME TIME DOG WALKERS

Neighborhood / Law Enforcement Notification Form

This form will be retained on file and will be used to authorize **Prime Time Dog Walkers** and it's representatives to be on the following stated premises for the purpose of pet care services.

Client Name _____

Address _____

City _____ State ____ Zip Code _____

Home Phone _____ Work Phone _____ Cell/Pager _____

Other Contact Phone _____

Prime Time Dog Walkers Contact Phone _____

To whom it may concern:

During my absence a representative of **Prime Time Dog Walkers** (_____) will be caring for my pet(s). I give **Prime Time Dog Walkers** my permission to enter my premise in order to fulfill the pet services contract currently in force. In the event I cannot be reached, I authorize **Prime Time Dog Walkers** to act as an agent on my behalf regarding my pet's physical care. Vehicle(s) used by **Prime Time Dog Walkers** with the following license(s) _____ will have my permission to legal park at my premises for the duration of the services. Services will rendered between _____ and _____.

* Signed _____ Date ____/____/____