



Guardian Pet Care & Massage

Pet Taxi Service Request

Pets:		Client Name:	
		Best Way to Contact:	
		Contact At:	

Transport Pet From:

Location Name:	
Address:	
City, Zip:	
Owner Name:	
Contact Name:	
Phone:	
Pick Up Time:	between and AM / PM

Service Date:

Travel Charges:	
Miles To Pick-up Address	
Miles From Drop-off Address	+
Total Travel Miles Minus 12	= - 12 =
x \$.50 Per Mile Over 12 =	\$
Total Travel Charges	\$

Transport Pet To:

Destination Name:	
Address:	
City, Zip:	
Purpose of Trip:	
Contact Name:	
Phone:	
Drop Off Time:	between and AM / PM

Pet Transport One-Way Fee:	
Miles One Way	- 6 =
x \$1 Per Mile Over 6 =	\$
+ Base Fee	\$ 25.00
One-Way Fee	\$

Additional Services:

- Drop Off Pet Only - No Additional Service
- Stay With Pet and/or Wait During Service

Estimated Visit Length:	minutes
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Pet Sitting Fee	\$
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- Return Pet to Original Location
(Leaving & Returning Later for Return Trip Starts New Base Fee and New Travel Charge)

Pick-Up / Leave Time:	AM / PM
	<input type="checkbox"/> or <input type="checkbox"/> Service Provider Will Call When Service Is Finished

Pet Transport Return Trip Fee	\$
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- Other Services Requested:

Other Fee	\$
Other Fee	\$

Payment Date:		Payment Method:	
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Estimated Total	\$
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Guardian Pet Care & Massage must confirm this request, and **a Signed Copy must be given to the pet sitter.**
 By submitting this request, I agree to all terms as stated on the Guardian Pet Care & Massage Legal Considerations Agreement.

Signature: _____ Date: _____