



630-485-0222
thehouseprofessionals@gmail.com
www.thehouseprofessionals.com

Marv Kombrink
322 W. Burlington Drive
Maple Park, IL 60151

Client Profile

Client Name: _____
Street Address: _____
City: _____ Zip Code: _____ Work Phone: _____
E-Mail: _____ Home Phone: _____
Cell/Pager: _____ Daily updates? Yes No Preference: _____

Do you own/rent your home? Own Rent If renting, landlord's name and phone # (for emergency) _____
(Phone, E-mail)

<u>Emergency Contact</u>	<u>Relationship</u>	<u>Telephone</u>	<u>Key ?</u>
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Does **anyone** else have access to your property during your absence (*housekeeper, gardener, pest control, relative or friends*)? If yes, please list: _____

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 injuries caused, in the event of pet bites, scratches, mauls, etc.? Yes No

If yes, who is your carrier and agent? _____

Is there a WEAPON (or weapons) in the house? Y N Which car/truck will be at home? _____

Location of cleaning supplies/extra paper towels: _____

Location of the inside and outside trash: Inside _____ Outside _____

Do you have a security system ? Yes No You must advise your security company you are using our service!

Name of Security Service _____ **Phone** _____

Entry Code: _____ Exit Code: _____ Password: _____ Location _____

Where is the nearest phone? _____

Please list miscellaneous instructions on the back of this form.

KEYS: Keep for future visits Return key. Due to security concerns, The House Professionals will **NOT** leave keys locked inside your home. Returned keys will result in a pick up fee for future services. Please notify us upon your return home to avoid additional fees for additional visits.

This signed document is authorization to enter the above address for the purpose of pet care or home security checks.

Client Signature

Date

The House Professionals

Date