[Your Business Name]
[phone] · [email] · [address]

Pet Sitting Incident & Emergency Record

For pet-sitting businesses — the factual, time-stamped record of anything unusual during a booking: what happened, what was done, who was told, and how it ended.

Document details

Incident reference number: _____

Booking reference: _____

Visit reference: _____

Client name: _____

Service address: _____

Assigned sitter: _____

Incident date: _____

Record completion date: _____

1 · Incident classification — type

- ☐ Pet injury or illness
- ☐ Medication error or refusal
- ☐ Missing or escaped pet
- ☐ Behaviour or bite incident
- ☐ Home-access / security issue
- ☐ Property damage
- ☐ Unexpected animal behaviour
- ☐ Veterinary emergency
- ☐ Other

Severity

- ☐ Low
- ☐ Moderate
- ☐ Urgent
- ☐ Emergency

Pet(s) involved: _____

Location of incident: _____

Owner present

- ☐ Yes
- ☐ No

2 · Event description

Time discovered: _____

Time event occurred (if known): _____

Person who observed the event: _____

Witnesses: _____

What happened

_____

_____

_____

_____

Visible signs or symptoms

Immediate risks identified

3 · Immediate actions taken

Time action started: _____

Person taking action: _____

Action taken

☐ Pet secured / supervised

☐ Emergency assistance requested

Other immediate measures

4 · Veterinary contact record

Veterinary clinic / hospital contacted: _____

Phone number: _____

Contact time: _____

Person contacted: _____

Transport time (if transported): _____

Person accompanying pet: _____

Veterinary visit / case reference: _____

Was the pet transported

☐ Yes

☐ No

Advice / instructions received

Follow-up instructions

5 · Owner notification

Notification time: _____

Person notified: _____

Response received time: _____

Secondary contact name / time: _____

Owner contacted

☐ Yes ☐ No

Contact method

☐ Phone ☐ Email

☐ Text ☐ Other

Secondary contact notified

☐ Yes ☐ No

Owner's instructions

_____

_____

6 · Outcome & resolution — final pet condition / status known to sitter

_____

_____

Veterinary outcome (if confirmed)

_____

_____

Follow-up appointment / instruction: _____

Incident resolved date / time: _____

Person responsible for follow-up: _____

☐ Pet returned to agreed care arrangements ☐ Additional monitoring required

Outstanding action

_____

_____

This is an operational incident record. It records observations, communications and actions taken. It does not replace veterinary assessment, emergency procedures, insurance reporting or any legally required incident documentation.

7 · Record acknowledgement

Report completed by: _____

Sitter signature: _____

Date / time completed: _____

Manager / owner review: _____

Reviewer signature: _____

Review date: _____

Client acknowledgement of receipt (optional):

_____

Client acknowledgement date: _____

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