

Pet Business & Service Evaluation Form - Groomer

Business Name:	
Contact Name: (& Position in Company)	
Address:	Phone #:
Email Address: Website:	Social Media? __FB__ Tw__Other:
Days / hours of operation: M_____ T_____ W_____ TH_____ F_____ Sa_____ Su_____	
When is payment for services due? Are payment options available? Do fees fit your budget, and are discounts for senior citizens or multi-pet households available?	
Is location and parking convenient?	
Is the facility clean, comfortable and well-organized?	
Are appointments required?	
Provide copies of business license, proof of insurance/bonding, training/certification or other authentic documentation pertaining to business or services, including letters of recommendation	
Is the groomer & staff: ____ Friendly ____ Knowledgeable ____ Well-organized ____ Dependable ____ Dressed appropriately ____ Flexible (scheduling)	
Does the groomer have any other specialties? (ie: TTouch, Holistic Remedies, other training, etc)	

Does the staff handle pets gently?
Are cages the appropriate size? (Do the animals have enough room to stand and turn around comfortably?)
Are dogs and cats caged in separate areas?
Are pets monitored regularly to prevent overheating during blow-drying?
Does the groomer keep complete pet records (including grooming, medical, vaccination, and emergency contact information)?
Are there pictures of previous clients/pets before & after?

Evaluation completed by (print name)

Title (job title pertaining to TAILS411)

Overall Impression (1 being poor, 5 being excellent)

_____ 1 _____ 2 _____ 3 _____ 4 _____ 5