Urinary Information

Owners Name:	Cat's Name:	Date:
What kind of litter do you us	se?	
Scented		
 Unscented 		
 Clumping 		
Non-Clumping		
o Clay		
o Paper		
o Pellet		
o Other:		
What kind of litter box?		
 Large 		
o Small		
 Uncovered 		
 Covered 		
Litter box access:		
1. Does the cat have to clin	nb stairs to use the box? Yes 🗖 🐧	No 🗖
2. Does the cat have to go t	through an opening to use the box?	Yes □ No □
3. Are there boxes on each	level of the house? Yes □ No □	3
4. Are the boxes in an area	that affords privacy? Yes 🗖 No	o
5. Is there a night light nea	er the boxes? Yes 🗖 No 🗖	
6. Are the boxes near a noi	sy area? Yes 🗖 No 🗖	
7. Are the boxes near the c	at's food? Yes 🗖 No 🗖	
Litter box properties:		
1. How many boxes or available	ilable?	

2. How many cats use the boxes?		
3. Where are the boxes located?		
4. How deep is the litter?		
5. How often do you scoop the boxes?		
6. How often do you wash the boxes?		
7. What do you use to clean them?		
If the cat is urinating outside the box:		
1. Position when urinating? Squats \square Stands and sprays \square		
2. Amounts you are finding? Lots of small spots □ A few larger puddles □		
3. Type of surface cat chooses to urinate on:		
4. Where have you found the urine?		
5. How do you know it's only this cat?		
6. How is the cat getting along with others in the house?		
7. What does the cat do if it sees another animal through the window?		