



Residential Cleaning

Date: _____/_____/_____

| *Client Information* |

Name: _____

Phone: (_____) _____

Email: _____

Address: _____

Pets / Instructions: _____

How Often:

One time Weekly Every 2 weeks Monthly _____

Preferred Days:

Mon Tues Wed Thurs Fri Sat Sun

Customer specific needs/products: _____

Other Information

Rate: \$ _____ every _____ Will leave payment CC on File _____

Key Release:

Code on File Key Kept for future use Other _____

NOTES:
