CWCC 799-3
PRINTED IN U.S.A.

YOUR COMPANY NAME

Address
CITY, STATE, ZIP CODE
Phone Number

CLEANING WORK ORDER

NAME	DATE ORDERED	DATE SCHEDULED
ADDRESS	SERVICE TECHNICIAN	
	☐ CARPET ☐ FURNITURE	
PHONE	☐ OTHER _____	
TERMS		

CARPET / ITEM	SIZE	SQ. FT.	PRICE	TOTAL	
	x				
	x				
	x				
	x				
	x				
	x				
	x				
	x				
	x				

SPECIAL INSTRUCTIONS

TOTAL MATERIALS		
TOTAL LABOR		
TAX		
TOTAL		

I certify that I have read conditions on reverse side and agree to same.

SIGNATURE _____ DATE _____

I hereby acknowledge the satisfactory completion of the above described work.

_____ / /

SIGNATURE DATE

Thank You