

Snow Removal Contract Agreement

Date: _____

Client Name: _____

Client Address: _____

Service Provider: _____

Service Provider Address: _____

Scope of Services

- Regular snow plowing of driveways and walkways.
- Clearing of parking areas.
- Salting and de-icing services as needed.

Service Schedule

Services will be provided upon accumulation of _____ inches of snow.

Payment Terms

Total Contract Amount: \$_____.

Payment due by: _____.

Liability and Insurance

The service provider agrees to maintain liability insurance and workers' compensation coverage.

Termination Clause

Either party may terminate this agreement with a 30-day written notice.

Signatures

Client Signature

Service Provider Signature