Yard Service Maintenance Agreement

Date: _____

Client Name: _____

Address:

Phone Number: _	
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Service Provider Information

Provider Name: _____

Company Name:	

Contact Number:	
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Scope of Services

The following services will be provided:

- Lawn mowing
- Edging
- Weed control
- Fertilization
- Mulching

Service Schedule

Services will be performed on a _____ basis (weekly, bi-weekly, monthly).

Payment Terms

The total fee for services is \$_____ per service. Payments are due on a _____ basis.

Terms and Conditions

- 1. The service provider will carry all necessary equipment for the job.
- 2. The client agrees to provide access to the property for service delivery.
- 3. Either party may terminate this agreement with a written notice of _____ days.

Signatures

Client Signature:	Date:
Provider Signature:	Date: