

Cleaning Services Provider Agreement

Date: _____

Client Name/Company: _____

Service Provider: _____

Service Location: _____

1. Scope of Services

The Service Provider agrees to provide cleaning services as described below:

- Type of Services: _____
- Frequency: _____
- Days/Times: _____
- Special Instructions: _____

2. Duration of Agreement

Commencement Date: _____

Termination Date: _____

This Agreement shall remain in effect unless terminated by either party with written notice according to the terms herein.

3. Payment Terms

- Total Fee: \$ _____
- Payment Frequency: (e.g., weekly, monthly) _____
- Payment Method: _____

4. Responsibilities

- Service Provider will supply: _____
- Client will supply: _____

5. Terms and Conditions

- Both parties agree to comply with applicable laws and regulations.
- Cancellations and rescheduling require minimum _____ notice.
- Any damages or issues must be reported within _____ of occurrence.

6. Termination

This agreement may be terminated by either party with _____ days written notice. All payments due until date of termination shall be settled in full.

7. Signatures

Client Signature

Name: _____

Date: _____

Service Provider Signature

Name: _____

Date: _____