

# CLIENT INFORMATION

## CONTACT INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## CREDIT CARD INFORMATION (Required)

Visa  MC  AMEX (Check one)

Name as it appears on card: \_\_\_\_\_ Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Address (  Check if the same as home address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## INITIAL REQUEST

Initial Request Description: \_\_\_\_\_

Location: \_\_\_\_\_

Additional Directions: \_\_\_\_\_

Purchase Price (if applicable): \_\_\_\_\_

**Please Note:** If your initial request requires we make a purchase on your behalf, we require a deposit for the expense based on the amount. A deposit of \$100 is required to initiate all requests.

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| <ul style="list-style-type: none"><li>• Services are offered on an hourly rate, ala carte basis at \$65 per hour (\$95 per hour weekends &amp; holidays)</li><li>• Rates are billed in 30 minute increments.</li><li>• A 24 hour notice is requested for all services.</li><li>• Additional mileage charges may apply.</li><li>• There is a one hour minimum service request.</li></ul> | <ul style="list-style-type: none"><li>• The cost of purchased items or third party services are not included.</li><li>• After hours, holidays and weekend services may incur additional cost.</li><li>• We respectfully request payment at time of service rendered</li></ul> |
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**Please fax your completed form to (813) 877-5791.** For your security, we prefer you fax this information to our secure home office, or we are happy to take your credit card number over the phone. You may scan and email this form at your own discretion.