SERVICE

USER CHECKLIST

SERVICE	YES	NO	N/A	NOTES
Period of performance				
SOW -				
Service schedule and work duties to be				
performed				
Locations to be serviced				
Contractor to provide all tools				
Disposal off-site or on-site				
Hours of when work is performed				
Have you considered Insurance				
requirement (Liability and Workmens				
Comp)				
Safety concerns				
Special seasonal requirements such as				
leaves				
Security clerance				
Optional services/extra costs				
EPA requirements for pesticide usage				
COR designation				
RIMP				
Key Notes:				