


DATE

N/R

ORDER CUM CONTRACT NO:

To, KEET END Pest Control Service Kotra Road, Opposite Rambhagh Marriage Hall Raigarh (CG) 496001 MO : 9399617373 E-Mail : keetend22@gmail.com		From, Name : Address for Billing : Pin : Mo. No..... E-Mail :
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With reference to the discussion with your representative, we are pleased to place our order-cum-contract for pest management services

A) TYPE OF SERVICE	TERM	FREQUENCY OF SERVICE
1.Household Service (Cockroaches, Ants, Spiders, etc.)		
2.Anti Termite Treatment		
3.Rodent Control service (Rats)		
4.Bed Bug Treatment		
5.Lizard Control		
6.Others		

B) PREMISES TO BE RELATED:

RESIDENCE		Address :
OFFICE		
SHOP		
GODOWN		Mo.No. :
OTHERS		Contact Person :

C) AREA OF PREMISES TO BE TREATED:

BASEMENT (Sq.Ft)	FLOOR (Sq.Ft)	FLOOR (Sq.Ft)	FLOOR (Sq.Ft)	FLOOR (Sq.Ft)

D) TERMS OF PAYMENT :

E) CONTRACT PERIOD :

F) BILLING INSTRUCTIONS :

G) SERVICE CHARGES : We hereby agree to pay your service charges of Rs.

(Rupees)..... for this contract.

Said premises shall be treated against pest as specified herein on defined frequency. This contract will be valid only after realization of payment.

FOR, KEET END Pest Control Service**Yours Truly**

Name & Designation

Customer's Signature & Date