**Deep Cleaning and Decontamination: Quotation Request:**

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| **Full Client Name:** | **Contact Details: Email Address & Contact Tel no:** |
| **Client Address:**  | **Additional Notes (to include how soon work is required):** |

|  |  |
| --- | --- |
| **Location details of where work is required:** | **Responses**  |
| Address: |  |
| Post code: |  |
| Is the Address Occupied/Void/In Use |  |
| Area within Address where clean required:**Option 1** – Spray apply disinfectant to required areas. **Option 2** – Spray apply disinfectant and wipe down surfaces to required areas. **Option 3** – Spray apply disinfectant, wipe clean surfaces and apply mist fogger for 72-hour bio protection to required areas. **Option 4 –** Full Decontamination Service required **Option 5 –** Vehicle Cleans **Option 6 –** Bespoke Service required ( Mix of the above) | Insert option required: (advice will be provided by the contractor) |
| Vehicle clean details (Size and no. vehicles ) |  |
| Size of the Area (sqm) to be cleaned:

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| --- |
| If unsure of exact measurement, please provide roughly and this can be measured and reviewed should the quotation be successful  |

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| Access Details:

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| Please confirm if security on site, if keys will need to be collected from a different location, if someone would meet us on site for access etc.  |

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| Parking Available? Please confirm exactly where, if it is pay and display, if  within company grounds, main roads etc.  |  |
| **Name of Person Authorising order** |  |
| **Email address of above Person** |  |
| **Contact name of above Person** |  |

Return to: contractor.connection@crawco.co.uk