



1770 Tremainsville Rd., Toledo, OH 43613

PHONE 419-476-9600

FAX 419-476-9605

ARNOLDS HOME IMPROVEMENT NEW CUSTOMER CHECKLIST

- Your estimator is: _____ Cell: _____
- Your Inside Project Manager is: _____ Cell: _____
- Your Onsite Project Manager is: _____ Cell: _____
- Estimator went over details of contract, line by line
- Lead based paint paperwork signed, procedures explained if applicable
- Price of job is: \$_____ Any details: _____
- Payment in full is due upon completion of job by crew leader explained (or other arrangement)
- Potential extras on job explained thoroughly. (Rotten wood, extra roof layers, interior window trim, etc.)
- Brand, style, and color details of materials: _____
- _____
- _____
- Dumpster placement/landscaping care, if applicable: _____
- _____
- Gaps between roofline and siding if multiple layer tear off's explained
- Extra cost for removal and reinstallation of gutter guards explained
- Customer covers attic contents on wood shakers/re-sheets to protect from falling debris
- Customer removes pictures/valuables off walls/shelves for siding jobs
- Customer removes all window treatments and moves heavy furniture away from windows for window jobs
- Customer ok's yard sign placement and duration
- Excess materials ordered for job remain Arnolds Home Improvement's property. Explain
- Ice damming beyond 2' above eaves not part of warranty explained. Explain code requirements
- Explain weather delays; before and during job
- All flashing explained to customer
- Warranty explanations; materials, labor; REPAIRS HAVE NO WARRANTIES explained
- Pipe boots and caulking have no warranty explained
- Next door neighbors info form filled out
- Customer satisfaction survey explained and left with customer
- Customer referral program explained and left with customer for after job is completed
- Customer comments: _____
- Approximate start date: _____
- Job should take approximately: _____ (weather and other factors permitting)

I, _____, understand and agree with above information on this checklist.

X _____
Homeowner/Authorized Representative

Date: _____

X _____
Arnolds Home Improvement