



New Client Onboarding Form

Company Name: ASAP Services Inc. / Rockwood Properties/ASAP Fire and Flood

Date: _____

Client Information

1. **Client Name:** _____
2. **Contact Person (if applicable):** _____
3. **Phone Number:** _____
4. **Email Address:** _____

Address Information

5. **Physical Address:**
 - **Street:** _____
 - **City:** _____
 - **State:** _____
 - **Zip Code:** _____
6. **Billing Address (if different from the physical address):**
 - **Street:** _____
 - **City:** _____
 - **State:** _____
 - **Zip Code:** _____

1. Insurance Information

- **Current Insurance Provider:** _____
- **Policy Number:** _____
- **Coverage Type (basic, comprehensive, etc.):** _____
- **Coverage Amount:** _____

2. Services Requested

- **Types of services (e.g., property management, maintenance, leasing):** _____
- **Specific requests or notes:** _____

3. Additional Comments

- **Any other information the client wishes to provide:** _____



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Services Requested

Please select the services you require (check all that apply):

Fire and Flood Division:

- Emergency Water Extraction
- Smoke Damage Restoration
- Mold Remediation
- Structural Drying
- Contents Cleaning and Restoration

Specialty Work Division:

- Post-Construction Cleaning
- Environmental Cleanup
- Vital Services for High-Risk Areas

Property Management Division:

- Tenant Placement
- Rent Collection
- Property Inspections
- Lease Management
- Repair and Maintenance Coordination

Commercial Cleaning and Building Maintenance Division:

- Office Cleaning Services
- Facility Maintenance
- Janitorial Services

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Additional Information

7. Preferred Method of Communication:

- Email
- Phone
- Text

8. Emergency Contact Name: _____

9. Emergency Contact Phone Number: _____

10. Notes/Specific Requests:

Client Agreement

I hereby authorize ASAP Services Inc. / Rockwood Properties to provide the agreed-upon services and understand that I will be billed according to the terms discussed.

Client Signature: _____ Date: _____