



Certainty Pledge

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Client Name: _____
Project Name: _____
Date: _____

The Household: Schedule & Routine

1. In order to respect the needs and schedules of your household, we would like to know who else will be present while we are working? What do you feel we need to know that is important to each person?
2. In order to minimize the disruption, our routine is to arrive between 9:00-10:00 am and depart between 5:00-6:00 pm. However, we would like to tailor our schedule to your routine as best as possible. Can you give us an idea of what hours work best for your household?
3. Which rooms or parts of your home and property are most critical to maintaining your family routine? (*ie What are your key entrance doors, so that we may plan our work as to not disrupt your normal flow in-and-out of the house*)
4. What is the best area for us to place our supplies and equipment while we are working at your home? Is there a preferred place for us to clean our tools if need be?
5. Do you have any pets? Are there any special concerns about your pets?

Communication

1. Will you be the person we will communicate with on a daily basis? If not, who will it be?
2. We want to give you a daily update about the project's progress (*what has been completed, what we will be working on next, etc*). What is your preferred form of communication: In person, by phone, written communication (*card or email*)?
3. When is the best time to contact you?

Expectations

1. What positive or negative experiences with contractors have you had, or heard about, that we should be aware of to ensure we meet your expectations?
 2. What should absolutely not happen on this project?

Any Additional Notes