



POOPSCOOPERS BOISE

208-703-6390

Pet Waste & Odor Removal

P.O. Box 7113
BOISE, ID 83707

sales@poopscoopersboise.com

New Customer Information Form / Service Contract

NAME _____ ACCOUNT # _____

ADDRESS _____ ZIP _____

CROSS STREETS _____

BILLING NAME AND ADDRESS IF DIFFERENT _____

HOME PHONE _____ WORK PHONE _____

CELL PHONE _____ E-MAIL _____

NAME AND TYPE OF PETS:

1) _____ 2) _____

3) _____ 4) _____

5) _____ 6) _____

How did you find out about us? _____

Customer Referral (name and phone #) _____

I/We the undersigned, hereby grant Poopscoopers Boise and its designated representative's access to my property for the following services: pet waste removal, spraying of an odor eliminator, and/or a germicidal spray. I also agree to pay by the 10th of the month for services in advance. This permission is given until such a time as the service terminates.

Print Name _____ Signature _____ Date _____

START DATE _____ END DATE _____ SERVICE DAY(S) _____

SERVICE CHARGE _____ HOW OFTEN _____

DISCOUNT(S) _____ FIRST TIME CHARGE _____

SPECIAL INSTRUCTIONS _____