

**COVERT TOWNSHIP SENIOR MILLAGE  
CHORE SERVICE AND HOME REPAIR**

**SERVICE QUOTE**

**Completed by  
Contractor/Handyman PRIOR to  
work being done.**

APPLICANT: FIRST M. LAST NAME	ADDRESS/ZIP
CONTRACTOR: FIRST M. LAST NAME	QUOTE NUMBER
CONTACT NUMBER	EMAIL ADDRESS
STREET ADDRESS	CITY/STATE/ZIP

**WHAT SERVICES WILL YOU PERFORM?**

**CHORES SERVICES:**

- Replace electric plugs, frayed cords
- Installing windows screens or storm doors (already owned by applicant)
- Weatherproofing home – around windows and doors
- Cleaning appliances, walls, or windows
- Cleaning and securing carpets and rugs
- Clearing attic or basement of fire hazards
- Painting
- Yard Clean-Up (grass cutting, leaf raking)
- Trimming small overhead tree branches (not requiring a ladder or chainsaw)
- General Clean-Up
- Other: \_\_\_\_\_

Labor Hourly Rate: \$ \_\_\_\_\_ Hours: \_\_\_\_\_ Total: \$ \_\_\_\_\_

Supplies: \_\_\_\_\_

Total of Labor and Supplies: \$ \_\_\_\_\_.

**HOME REPAIR:**

- Exterior building repairs: roof and siding
- Structural repair: foundation or flooring
- Door, window, or home hardware repairs/replacement
- Plumbing, drain or water supply repair
- Electrical or heating system repair
- Interior wall or fixture repair/replacement
- Exterior stair, porch, or deck repair
- Other: \_\_\_\_\_

Labor Hourly Rate: \$ \_\_\_\_\_ Hours: \_\_\_\_\_ Total: \$ \_\_\_\_\_

Supplies: \_\_\_\_\_

Total of Labor and Supplies: \$ \_\_\_\_\_.

**Contractor/Handyman Completes**

I, \_\_\_\_\_, certify I will perform the described listed services at the address stated above. These services will be completed in accordance with the **Minimum Service Standards** as outlined by Covert Township’s Senior Millage. I have received a copy of such standards from the homeowner.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**PLEASE Be Aware that checks will be processed between 14-20 Business Days upon receipt of the Service Invoice Form.**

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**OFFICE USE ONLY:**

Senior Service Program Administrator Signature: \_\_\_\_\_

Date: \_\_\_\_\_