



Service Provider Application Form

Personal Information

Date _____

Full Name _____

Email Address _____ Contact Phone _____

Residential Address _____

State/Province _____ Code _____

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These questions are designed to cover essential aspects of the service provider's personal, professional, and operational background, ensuring that only qualified and reliable providers are registered on your website..

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Professional Information

Business Name (if applicable): _____

Business Address: _____

Years of Experience in the Industry: _____

Professional Qualifications and Certifications: _____

Do you have any specialties or areas of expertise? If so, please specify: _____

Background and Legal Checks

Do you have a valid business license? (Please upload a copy) _____

Do you have liability insurance? (Please upload a copy) _____

Have you ever been convicted of a crime? If so, please provide details: _____

Do you consent to a background check? _____

Do you have any pending lawsuits or legal actions against you or your business? If so, please provide details: _____

References and Reviews

Please provide at least three professional references (Name, Contact Information, Relationship):

Can you provide any testimonials or reviews from previous clients? _____

Do you have a portfolio or examples of past work? (Please upload or provide links) _____

Operational Information

What areas or regions do you serve? _____

What are your operating hours? _____

Do you offer emergency or after-hours services? _____

What is your pricing structure (hourly rate, fixed price, etc.)? _____

Do you offer any guarantees or warranties on your work _____

Additional Information

Why do you want to join our platform? _____

Do you follow industry standards and best practices?_____

Do you have a policy for handling customer complaints and disputes? _____

How did you hear about us? _____

Is there any other information you would like to provide? _____

Please check any of the following service you offer

- ☐

Appliances Repair
- ☐

Plumber
- ☐

Electric Services
- ☐

Painting and Decorations
- ☐

Capentry
- ☐

HAVC
- ☐

Gardening and landscape
- ☐

Home Security Services
- ☐

Handyman Services
- ☐

Roofing Services
- ☐

Cleaning Services
- ☐

Locksmith Services

Please check any of the following documentation you have supplied

- ☐

Identity Document
- ☐

Certification
- ☐

liability insurance
- ☐

Work Licence
- ☐

Tax Certificate
- ☐

portfolio
- ☐

Police Clearance Report
- ☐

business license

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*I declare that I have read this application form thoroughly and I understand every question asked. I believe I have no condition that may affect the quality of service I provide. All of the given answers are correct and true to the best of my knowledge. I confirm that the information I have supplied is legitimate and I give permission for it to be verified*Scan and email the application form to

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Service Providers's Signature

Administrator's Signature