

Apartment Cleaning Quotation

Quotation Reference No: _____

Client Details

Client Name: _____

Address: _____

Phone / Email: _____

Date: _____

Cleaning Details

Apartment Size: _____

Number of Bedrooms: _____

Number of Bathrooms: _____

Frequency:
Single / Weekly / Bi-Weekly / Monthly

Special Instructions: _____

Quotation Breakdown

Description	Quantity	Unit Price	Total
General Cleaning	_____	_____	_____
Kitchen Cleaning	_____	_____	_____
Bathroom Cleaning	_____	_____	_____
Additional Services	_____	_____	_____

Subtotal: _____

Tax (if applicable): _____

TOTAL: _____

Terms & Conditions

- Quotation valid for ____ days from the date above.
- Payment terms: _____.
- Any additional service not listed above may be charged separately.

Notes: _____

Company Representative

Client Signature