**Contractor Agreement Terms\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What [COMPANY NAME] Offers:**

* Guaranteed payment whether the owner pays or not.
* A majority of the time we pay out weekly.
* Consistent Work Orders.
* We offer fast and convenient on-line invoicing through our system. Virtually no time spent invoicing for you
* [COMPANY NAME] does not mark up prices.

**What [COMPANY NAME] Requires of All Contractors Hired:**

* Prior to hiring you will need to agree go off our price list if item is listed.
* 5% monthly contribution to marketing fund ([COMPANY NAME] contributes 5% as well – Questions can be thoroughly answered during meeting with CEO)
* Use M1 vendor portal for all work orders, estimates, and invoicing
* Contractor must attempt contact of a resident within 4 hours of receiving a work order
* Submit before and after photos for each repair. (Does not apply to property rehabs)

***If you are interested in interviewing with [COMPANY NAME] for possible hire, you must submit the forms/information listed below prior to us scheduling an interview. Once we have received all documentation and it is approved we will contact you to set up an interview at our office.***

SUBMIT ALL COPIES TO[**[COMPANY EMAIL]**](mailto:acor@mgtone.com)

1. W-9 Form
2. Business License
3. Contractor License and/or Workers Compensation Insurance (If applicable)
4. Fill out in detail your repair costs on attached worksheet and return unless disregarded by [COMPANY CONTACT] in e-mail

(E-mail [COMPANY CONTACT] at [[COMPANY EMAIL]](mailto:acor@mgtone.com) for the worksheet or if you have any questions on it – Worksheet does not apply to Roofers, Locksmiths, Pest control, or Pool maintenance)

1. 3 references we can contact (Relatives are not references)
   1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Liability Insurance with Management added as Certificate Holder (The information below must be on the certificate by the time you begin receiving work orders from [COMPANY] but not prior to meeting with CEO)

**[COMPANY NAME]**

**[ COMPANY ADDRESS]**