

New Client Information Form

Thank you for choosing **OC Cleaners**. Please complete this form. If you have any questions or need additional information, feel free to call us at (949) 770-0500.

First name: _____

Last Name: _____

Phone: _____

E-mail: _____

Credit Card Number: _____ **Expiration Date:** _____ / _____

Billing Address: _____

Delivery Address: _____

Pickup/Drop off location: _____

Will you authorize us for repairs of \$8 or less Yes No

Signature: _____

I authorize OC Cleaners to charge my credit card for services provided.

Remarks/Instructions:

