



Flatland APPLICATION

Flatland Management Holdings LLC

405 N Wickham Rd.
Melbourne, FL 32901

Personal Information

Full Name:	
Date of birth:	
Address:	
Email:	Phone:

Educational Background

Division	Institution	Year of Completion

Cleaning Experience

Years of experience:	# Employees:
Cleaning specialties: <input type="checkbox"/> Residential <input type="checkbox"/> AirBNB/VRBO/_____	
<input type="checkbox"/> Offices <input type="checkbox"/> Post-Construction	
Do you own your own equipment/supply? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Are you currently working with other platforms (CRM) or clients? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, please describe: _____ _____	

Business Information

Business name (if applicable):	
Registered LLC/Sole Proprietorship? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Do you carry general liability insurance? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Social media accounts (links/handles):	

Availability

Days and times available:

☐ MON ☐ TUE ☐ WED ☐ THUR ☐ FRI ☐ SAT ☐ SUN

Desired minimum and maximum hours:_____

Cities you service in

Brevard:_____

Documents

Please provide the following with your application. These can be emailed to support@flatlandclean.com

- ☐ Copy of Driver's License or Photo ID
- ☐ W-9 Form
- ☐ Proof of Liability Insurance

By signing below, I confirm that the information provided is accurate and complete. I understand that submission of this application does not guarantee partnership with Flatland Clean.

Signature:_____

Date:_____