

Date:

14B-1822 Whites Rd. Suite 416 Pickering, ON LIV 0B1

Contact Information:

Name:				
Address:			Own Vehicle	□Yes □No
Email:			Valid Licence	□ _{Yes} □ _{No}
Cell Phone:			Licence Plate	
You're Expe	rience: 🗖 🛭	ess than 1 year	More than 2 years	More than 5 years
Basement	Flooring	Demolition	Installation	Backyard
Kitchen	Paint	Plumbing	Handyman	Deck
Bathroom	Drywall	Doors	Other	Landscape
You're Equi	pment:			
☐ Hand Tools	Power T	ools	pment O	ther
Notes:				
Desired Comp	ensation: \$	/hr OR	\$ Daily	Rate
Possible Start	Date:			