COMMERCIAL WALKTHROUGH QUESTIONNAIRE

CERTIFIED FOR YOUR PEACE OF MIND

Starbiz Cleaning LLC · Professional Commercial & Janitorial Services

This questionnaire is completed by a **Starbiz Cleaning LLC** representative during or after a commercial property walkthrough. Information collected is used to prepare an accurate scope of work, service proposal, and pricing. Complete all sections thoroughly.

SECTION 1 · CLIENT & PROPERTY INFORMATION

BUSINESS / COMPANY NAME *

PRIMARY CONTACT NAME *

PHONE NUMBER *

(___) ___-____

EMAIL ADDRESS *

email@domain.com

BEST TIME TO REACH

PROPERTY / SERVICE ADDRESS *

CITY

STATE

ZIP CODE

BUILDING / SUITE NAME (IF APPLICABLE)

PROPERTY MANAGER / FACILITY CONTACT

SECTION 2 · FACILITY OVERVIEW

TYPE OF FACILITY

- ☐ Office Building
- ☐ Medical / Dental Office
- ☐ Retail Store
- ☐ Restaurant / Food Service
- ☐ Warehouse / Industrial
- ☐ School / Educational
- ☐ Gym / Fitness Center
- ☐ Government / Municipal
- ☐ Church / Place of Worship
- ☐ Hotel / Hospitality
- ☐ Multi-Tenant Complex
- ☐ Other

TOTAL SQUARE FOOTAGE

Approx. sq ft

NUMBER OF FLOORS / LEVELS

YEAR BUILT / APPROX. AGE

NUMBER OF RESTROOMS

NUMBER OF BREAK ROOMS / KITCHENS

NUMBER OF CONFERENCE ROOMS

TOTAL NUMBER OF OFFICES / SUITES

AVERAGE DAILY OCCUPANCY / FOOT TRAFFIC

PRIMARY FLOORING TYPES

- ☐ Carpet
- ☐ Hardwood
- ☐ Tile / Grout
- ☐ Vinyl / LVP
- ☐ Polished Concrete
- ☐ Epoxy
- ☐ Laminate
- ☐ Mixed

SECTION 3 · CURRENT CLEANING STATUS

Is the facility currently being cleaned by another service? **Yes** **No** **N/A**

If yes, are you under contract with the current provider? **Yes** **No** **N/A**

If under contract, what is the termination date?

CURRENT CLEANING PROVIDER (IF APPLICABLE)

HOW OFTEN IS IT CURRENTLY CLEANED?

Daily / Weekly / Bi-weekly / Monthly

PRIMARY REASON FOR SEEKING A NEW PROVIDER / QUOTE

e.g. pricing, quality, reliability, expanding services...

HOW LONG HAS THE FACILITY BEEN OPERATING?

COMMERCIAL WALKTHROUGH QUESTIONNAIRE

CERTIFIED FOR YOUR PEACE OF MIND

Starbiz Cleaning LLC · Professional Commercial & Janitorial Services

SECTION 4 · SCOPE OF SERVICES NEEDED

ROUTINE CLEANING SERVICES REQUIRED

- ☐ General Office Cleaning
- ☐ Floor Vacuuming
- ☐ Dusting (Surfaces & Furniture)
- ☐ Elevator Cleaning
- ☐ Restroom Sanitization
- ☐ Floor Mopping
- ☐ Glass & Window Cleaning (Interior)
- ☐ Stairwell Cleaning
- ☐ Kitchen / Break Room
- ☐ Trash Removal & Liner Replacement
- ☐ Lobby / Entrance Cleaning
- ☐ Conference Room Cleaning

SPECIALTY / ADD-ON SERVICES

- ☐ Deep / Detail Cleaning
- ☐ Carpet Shampooing / Extraction
- ☐ Post-Construction Cleaning
- ☐ Biohazard / Disinfection
- ☐ Floor Stripping & Waxing
- ☐ Pressure Washing (Exterior)
- ☐ Move-In / Move-Out Cleaning
- ☐ Medical-Grade Sanitization
- ☐ Floor Buffing & Polishing
- ☐ Window Cleaning (Exterior)
- ☐ Event Setup & Cleanup
- ☐ Graffiti Removal

REQUESTED CLEANING FREQUENCY

- ☐ Daily (5x/week)
- ☐ 2x per Week
- ☐ Monthly
- ☐ Daily (7x/week)
- ☐ Weekly
- ☐ One-Time / As-Needed
- ☐ 3x per Week
- ☐ Bi-Weekly
- ☐ Custom Schedule

PREFERRED SERVICE DAYS & TIME WINDOW

e.g. Mon–Fri after 6:00 PM, weekends only...

SECTION 5 · ACCESS & SECURITY

Is a key, access card, or security code required to enter?	Yes	No	N/A
Will a facility representative be present during cleaning?	Yes	No	N/A
Are there restricted or high-security areas to be excluded? *If yes, describe below.*	Yes	No	N/A

RESTRICTED AREAS / SPECIAL ACCESS NOTES

BUILDING ACCESS METHOD

Key / Keypad / Badge / Doorman / Other

SECURITY CONTACT / AFTER-HOURS NUMBER

VENDOR SIGN-IN / INSURANCE REQUIREMENTS

Sign-in log? Background check? Certificate required?

Are background checks or insurance certificates required?	Yes	No	N/A

SECTION 6 · SUPPLIES & EQUIPMENT

SUPPLY RESPONSIBILITY

- ☐ Client Provides All Supplies
- ☐ Shared / Negotiated
- ☐ Starbiz Provides All Supplies
- ☐ Client Provides Paper Products Only

Is there a designated janitorial storage area on-site?	Yes	No	N/A
Is commercial cleaning equipment available on-site? *e.g. floor machine, mop sink, wet/dry vac*	Yes	No	N/A

EQUIPMENT AVAILABLE ON-SITE

- ☐ Mop & Bucket
- ☐ Wet/Dry Vac
- ☐ Commercial Vacuum
- ☐ Janitorial Cart
- ☐ Floor Scrubber / Buffer
- ☐ None
- ☐ Pressure Washer

Select all that apply

COMMERCIAL WALKTHROUGH QUESTIONNAIRE

CERTIFIED FOR YOUR PEACE OF MIND

Starbiz Cleaning LLC · Professional Commercial & Janitorial Services

PREFERRED CLEANING PRODUCTS

- ☐ Eco-Friendly / Green Certified
- ☐ Fragrance-Free
- ☐ Hospital-Grade Disinfectants
- ☐ No Preference
- ☐ Client Specified Products
- ☐ Hypoallergenic

SECTION 7 · FACILITY CONDITION ASSESSMENT

Rate the current condition of each area (1 = Poor · 5 = Excellent)

Restrooms	1	2	3	4	5
Lobby / Reception / Entryway	1	2	3	4	5
Office / Work Areas	1	2	3	4	5
Kitchen / Break Room(s)	1	2	3	4	5
Flooring (Overall)	1	2	3	4	5
Windows & Glass Surfaces	1	2	3	4	5
Exterior / Parking Area	1	2	3	4	5
Overall Facility Cleanliness	1	2	3	4	5

AREAS OF GREATEST CONCERN / IMMEDIATE ATTENTION NEEDED

Describe problem areas, stains, buildup, odors, etc.

SECTION 8 · SPECIAL REQUIREMENTS & NOTES

Are there any pets or animals on the premises?	Yes	No	N/A
Are there biohazard, chemical, or hazardous material areas?	Yes	No	N/A
Does the facility require OSHA or specific safety compliance?	Yes	No	N/A
Are there ADA-specific cleaning requirements?	Yes	No	N/A
Are there sensitive electronics or servers requiring special care?	Yes	No	N/A

ADDITIONAL SPECIAL INSTRUCTIONS / CLIENT REQUIREMENTS

e.g. products to avoid, noise restrictions, parking info...

SECTION 9 · BUDGET & TIMELINE

ESTIMATED MONTHLY CLEANING BUDGET

e.g. $500–$1,000 / month

CONTRACT TERM PREFERENCE

Month-to-Month / 6 Months / 1 Year / Open

TARGET SERVICE START DATE

MM / DD / YYYY

DECISION TIMELINE

e.g. within 1 week, 30 days...

HOW DID YOU HEAR ABOUT STARBIZ CLEANING?

- ☐ Google Search
- ☐ Google Maps / Reviews
- ☐ Referral / Word of Mouth
- ☐ Social Media
- ☐ Flyer / Door Hanger
- ☐ Yelp
- ☐ Angi / HomeAdvisor
- ☐ Nextdoor
- ☐ Other

COMMERCIAL WALKTHROUGH QUESTIONNAIRE

CERTIFIED FOR YOUR PEACE OF MIND

Starbiz Cleaning LLC · Professional Commercial & Janitorial Services

SECTION 10 · REP NOTES & WALKTHROUGH SUMMARY

WALKTHROUGH OBSERVATIONS / INTERNAL NOTES

Property condition, client priorities, scope details, special concerns...

RECOMMENDED SERVICE PACKAGE / PROPOSAL NOTES

Suggested frequency, add-ons, estimated hours, staffing needs...

ESTIMATED MONTHLY SERVICE HOURS

ESTIMATED NUMBER OF CLEANERS REQUIRED

FOLLOW-UP ACTIONS REQUIRED

- ☐ Send Proposal / Quote
- ☐ Submit Insurance Certificate
- ☐ Send Service Agreement
- ☐ Confirm Budget Alignment
- ☐ Schedule Follow-Up Call
- ☐ Provide References
- ☐ Schedule Trial / Demo Clean
- ☐ Other

WALKTHROUGH CONFIRMATION & SIGN-OFF

By signing below, both parties confirm this walkthrough was completed and the information recorded is accurate to the best of their knowledge. This form does not constitute a binding service agreement.

CLIENT / AUTHORIZED REPRESENTATIVE NAME*

TITLE / ROLE

CLIENT SIGNATURE

Sign here

DATE*

MM / DD / YYYY

STARBIZ CLEANING REPRESENTATIVE*

EMPLOYEE ID / TITLE

REPRESENTATIVE SIGNATURE

Sign here

WALKTHROUGH DATE*

MM / DD / YYYY