Job Completion Sign-Off

Job Completion Sign-Off

1. Job Details

- Provider: _____
- Worker / technician: _____
- Client: _____
- Service address: _____
- Job reference: _____
- Completion date: _____
- Arrival: _____
- Departure: _____

2. Scope Completed

3. Detailed Work Performed

4. Parts and Materials Used

5. Items Discovered Outside the Original Scope

The following items were observed during the visit but are NOT included in the work performed under this job. They are recorded here so the client is aware and can decide whether to address them under a separate work order:

Blank form from EosLog. Fill it in on your phone and send it as a PDF: eoslog.com/templates/job-completion-signoff

6. Recommendations

7. Photo Evidence

Before-and-after photographs taken during this visit are attached separately or available in the provider's job record. The photos are part of the record of work performed and should be retained alongside this sign-off.

8. Client Acknowledgment

By signing below, Client acknowledges that: (a) Provider performed the work described in this Sign-Off, (b) Client has had the opportunity to inspect the work, (c) Client accepts the work as performed, and (d) Client authorizes Provider to invoice for the agreed amount.

If Client believes any portion of the work is incomplete or defective, Client will note the specific items below before signing. Items not noted are accepted as performed.

- Items Client believes are incomplete or defective (write "None" if all work is accepted):

CLIENT

Signature

Printed Name and Date

WORKER

Signature

Printed Name and Date

Blank form from EosLog. Fill it in on your phone and send it as a PDF: eoslog.com/templates/job-completion-signoff