



SplashLab | Mobile Car Wash

We Come to You

Mobile: 065 941 5331 | Email: splashlab792@gmail.com

1. CLIENT INFORMATION

Business Name: _____ Date: ____ / ____ / ____ Handled by (Staff Name): _____
Full Name: _____ Phone Number: _____
Email Address: _____
Preferred Contact Method: ☐ Call ☐ WhatsApp ☐ SMS ☐ Email
Address for Service: Street: _____ Suburb/Area: _____
Postal Code: _____ Location Type: ☐ Home ☐
Office ☐ Parking Lot ☐ Other: _____

2. VEHICLE INFORMATION

Make (Brand): _____
Model: _____
Year: _____
Color: _____
Number Plate: _____
Vehicle Type: ☐ Hatchback ☐ Sedan ☐ SUV ☐ Bakki ☐ Minibus ☐ Other: _____

3. SERVICE REQUEST

Select Package: ☐ Basic Wash – Exterior only (body wash, rinse, dry) ☐ Deluxe Wash – Exterior + quick interior vacuum ☐ Full Detail – Full interior + exterior deep clean ☐ Engine Clean – Add-on ☐ Wax & Polish – Add-on ☐ Seat Shampoo – Add-on ☐ Other (please specify): _____ Special Requests / Notes: _____

4. SCHEDULING

Preferred Date: ____ / ____ / ____
Preferred Time: ☐ Morning ☐ Midday ☐ Afternoon ☐ Evening
Service Frequency: ☐ Once-off ☐ Weekly ☐ Bi-weekly ☐ Monthly ☐ Corporate Contract

5. PAYMENT INFORMATION

Preferred Payment Method: ☐ Cash ☐ EFT ☐ Card ☐ Mobile Payment (e.g., SnapScan / Yoco)
Invoice Required? ☐ Yes ☐ No

6. CONDITION CHECK (Before Wash)

For staff to complete before service begins

- Scratches noted
- Dents noted
- Broken/missing parts
- Interior stains noted
- Photos taken before wash (recommended)

Staff Initials: _____

7. CLIENT CONSENT

I confirm that the information provided is accurate and I authorize the mobile car wash team to perform cleaning services on my vehicle. I understand that while all reasonable care is taken, the company is not liable for pre-existing damage or loss of personal items left inside the vehicle.

Client Signature: _____

Date: ____ / ____ / ____

8. SERVICE COMPLETION CHECKLIST (Staff Use Only)

- Exterior cleaned & dried
- Tyres dressed
- Interior vacuumed
- Dashboard cleaned
- Windows & mirrors polished
- Fragrance applied (if requested)
- Client walk-around completed

Staff Name: _____

Client Approval Signature: _____

