



**J&E Restorations General Contracting Company
Cancellation Request Form**

Customer Information

Full Name: _____
Address: _____
City, State, ZIP Code: _____
Phone Number: _____
Email Address: _____

Project Information

Project Address (if different from above): _____
Project Description: _____
Scheduled Start Date: _____
Scheduled Completion Date: _____
Contract Number/Reference: _____

Cancellation Request Details

Date of Cancellation Request: _____
Reason for Cancellation (please check one):

- Change of plans
- Budget constraints
- Personal reasons
- Found alternative contractor
- Other: _____

Terms and Conditions of Cancellation

- A cancellation fee may apply based on the terms of the signed contract. Please refer to the contract for specific details.
- If the cancellation occurs after project work has started, any work completed up to the cancellation date will be invoiced.
- Any paid deposits may be non-refundable, depending on the agreement terms.

Acknowledgment

By signing below, I acknowledge that I have reviewed the terms and conditions of the

cancellation and understand the potential fees or penalties associated with canceling this project. I also understand that any deposits or payments made are subject to the cancellation policy in the original contract.

Customer Signature: _____

Date: _____

For Office Use Only

Cancellation Processed By: _____

Date Processed: _____

Refund Issued (if applicable): _____

Amount Due After Cancellation: _____