



# **HOME MAINTENANCE PLANNER**

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# Home Maintenance Checklist

Interior

Exterior

Spring

|                          |  |                          |  |
|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |

Summer

|                          |  |                          |  |
|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  |

# Lawn & Garden

|                         | Spring |     |      | Summer |     |      |
|-------------------------|--------|-----|------|--------|-----|------|
| Lawn & Garden Treatment | Early  | Mid | Late | Early  | Mid | Late |
|                         |        |     |      |        |     |      |
|                         |        |     |      |        |     |      |
|                         |        |     |      |        |     |      |
|                         |        |     |      |        |     |      |
|                         |        |     |      |        |     |      |
|                         |        |     |      |        |     |      |
|                         |        |     |      |        |     |      |

|                         | Fall  |     |      | Winter |     |      |
|-------------------------|-------|-----|------|--------|-----|------|
| Lawn & Garden Treatment | Early | Mid | Late | Early  | Mid | Late |
|                         |       |     |      |        |     |      |
|                         |       |     |      |        |     |      |
|                         |       |     |      |        |     |      |
|                         |       |     |      |        |     |      |
|                         |       |     |      |        |     |      |
|                         |       |     |      |        |     |      |
|                         |       |     |      |        |     |      |

# Home Maintenance Schedule

| January                  |  | February                 |  | March                    |  |
|--------------------------|--|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |

  

| April                    |  | May                      |  | June                     |  |
|--------------------------|--|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |

  

| July                     |  | August                   |  | September                |  |
|--------------------------|--|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |

  

| October                  |  | November                 |  | December                 |  |
|--------------------------|--|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |

# Contractor Directory

|                                      |        |           |
|--------------------------------------|--------|-----------|
| <b>Service:</b> <input type="text"/> |        |           |
| Company:                             | Phone: |           |
| Contact Person:                      | Fax:   |           |
| Billing Address:                     | Email: |           |
| Account:                             | Login: | Password: |
| <b>Service:</b> <input type="text"/> |        |           |
| Company:                             | Phone: |           |
| Contact Person:                      | Fax:   |           |
| Billing Address:                     | Email: |           |
| Account:                             | Login: | Password: |
| <b>Service:</b> <input type="text"/> |        |           |
| Company:                             | Phone: |           |
| Contact Person:                      | Fax:   |           |
| Billing Address:                     | Email: |           |
| Account:                             | Login: | Password: |
| <b>Service:</b> <input type="text"/> |        |           |
| Company:                             | Phone: |           |
| Contact Person:                      | Fax:   |           |
| Billing Address:                     | Email: |           |
| Account:                             | Login: | Password: |
| <b>Service:</b> <input type="text"/> |        |           |
| Company:                             | Phone: |           |
| Contact Person:                      | Fax:   |           |
| Billing Address:                     | Email: |           |
| Account:                             | Login: | Password: |



