

Contractor Cancellation of Contract Form

This Cancellation of Contract is entered into on: _____
(Date)

Between:

Contractor Name: _____

Business Name (if applicable):

Address: _____

Phone Number: _____

Email: _____

AND

Client Name: _____

Project Address: _____

Phone Number: _____

Email: _____

Cancellation Details

1. Reason for Cancellation:

Project delays

Financial issues

Breach of contract

Other: _____

2. **Termination Date:** The contract shall officially end on _____.
3. **Final Payment Settlement:**
 - **No outstanding balance remains.**
 - **The client must pay \$_____ before termination is finalized.**
4. **Property & Equipment:** The contractor agrees to remove any remaining tools or equipment by _____.
5. **No Future Liability:** Both parties agree that neither shall pursue legal claims against the other post-cancellation.

Signatures

Contractor's Signature: _____ **Date:** _____

Client's Signature: _____ **Date:** _____