



**CHILES**  
*ENTERPRISES, LLC*  
LANDSCAPE, TREE & TURFCARE

**TEAM MEMBER TIME-OFF REQUEST FORM**

Date: \_\_\_\_\_

Team Member's  
Name: \_\_\_\_\_

Date(s) and Time Off  
Requested: \_\_\_\_\_

Reason for Time Off  
(Personal, Vacation): \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*For complete parameters of Paid Time Off, please reference our Team Member Handbook*

Team Member's  
Signature: \_\_\_\_\_

***Office Use Only***

- Time off granted as vacation leave.
- Time off granted as personal leave.
- Time off granted unpaid
- Time off not granted. (\_\_\_\_\_)

General  
Manager's  
Signature: \_\_\_\_\_

Date: \_\_\_\_\_

PTO was awarded in the following pay period (*if applicable*): \_\_\_\_\_

Office Manager's Signature: \_\_\_\_\_

Date: \_\_\_\_\_