## **MAINTENANCE SAVINGS AGREEMENT**

Invoice Number MA-

| deating & Air • General Repair |  |
|--------------------------------|--|
| 402-362-2500                   |  |
| A Name You Can TRUST           |  |

Date

We agree to provide you with a complete precision tune-up and professional cleaning as described below for your cooling and/or heating equipment during term indicated.

100% CUSTOMER SATISFACTION MONEY BACK GUARANTEE

Any filters, repairs or replacement parts are not covered under this regular precision tune up. All filters, refrigerant, parts and repairs are an additional charge.

| Billing Address: | Address, if different from billing address: |
|------------------|---|
| Name             |   |
| Address          | Address                                     |
| City             | City  |
| State Zip        |   |
| Phone            | Contract Term Effective Dates               |
| Cell Phone       |   |

## BENEFITS:

•Tighten all electrical

- •20% discount on repair service (Labor and Parts) •Never pay an overtime charge
- •Extended equipment life Priority customer
- Improved capacity on equipment

- •Lower utility bills
- •Inflation Protection for up to 3 years •Improve efficiency on equipment
- UDE DIAGNOSIS CHARGE OR REFRIGERANT!!

| Equipment<br>Type | Brand     | Age | Model Number | Serial Number | Filter Size |
|-------------------|-----------|-----|--------------|---------------|-------------|
|                   |           |     |              |               |             |
|                   | N-3041144 |     |              |               |             |
|                   |           |     | -            |               |             |
|                   |           |     |              |               |             |
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|---|---------------------------|---|---|---------------------------|------------------------|--|--|--|
|   |                           |   |   |                           |                        |  |  |  |
| PRECICIONITI  | DIE IID                   |   | TED IC OF                               | TIDIII EDGAT GAL          | DICC ACREDITATION      |  |  |  |
| PRECISION TU  |                           | TERMS OF UNIVERSAL SAVINGS AGREEMENT PER UNIT |   |                           |                        |  |  |  |
| PROCEDURES<br>INCLUDE   |                           | ☐ Cooling                                     |   | ☐ Heating                 |                        | # of Systems   |  |  |
| <ul> <li>No repairs or improvements will be undertaken without customer's authority</li> <li>Adjust operating pressures</li> </ul>  |                           | Monthly                                       |   | Good Value One Year       | Better Value Two Years |  |  |  |
|   |                           | Investmer                                     | nt \$30.00                              | Investment \$199.0        | Investment \$383       | .00 Investment \$567.00  |  |  |
| <ul> <li>Adjust thermostat calibration</li> <li>Clean &amp; adjust blower components</li> </ul>   | # of Tune-u<br><b>Two</b> |   | # of Tune-ups<br><b>Two (2)</b>         | # of Tune-ups<br>Four (4) | -                      |  |  |  |
| <ul><li>Clean &amp; adjust burner<br/>assembly</li><li>Clean &amp; treat condensate<br/>drains</li></ul>  |                           | Automatic V                                   | utomatic Withdrawal Check # Payment \$  |                           |                        |  |  |  |
|   |                           | New   | Renewal                                 |                           |                        |  |  |  |
| <ul><li>Clean heat exchanger</li><li>Clean (indoor) cooling coil, if assessable</li></ul>   | Credit Card               |   | Name on Card (Please Print)  Signature: |                           |                        |  |  |  |
| Clean or replace filters     Clean (outdoor) condenser coil     Lubricate all moving parts     Measure for correct air flow     Measure temperature     difference     Measure all volts and amps |                           |   |   |                           | Amount \$              |  |  |  |
|   |                           | Customer Signature:                           |   |                           | ,                      | Date   |  |  |
|   |                           | Technician Signature:                         |   |                           |                        | Date   |  |  |
| <ul><li>Test starting capabil</li><li>Test all safety control</li></ul>   |                           | Signature: Date                               |   |                           |                        |  |  |  |

Thank you for allowing us to be of service to you!!

PLEASE PAY FROM THIS INVOICE - NO STATEMENT WILL BE SENT!