

AAA Pools & Spas Winterizing Contract

Name _____ E-Mail _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Cell _____ Work _____

Pool Type: In-Ground Above Ground
 Pool Type: Concrete Liner Fiberglass Concrete All Fiberglass

Residential Pool and / or Spa Winterizing

Total approximate charges

<input type="checkbox"/> Close Pool	Pool Size _____ X _____				
<input type="checkbox"/> Close spa	Portable <input type="checkbox"/> Attached To Pool <input type="checkbox"/>				
<input type="checkbox"/> Install Winter Cover	<input type="checkbox"/> Water Tube <input type="checkbox"/> Safety				
<input type="checkbox"/> Additional Pool Pumps	Number Of Pumps <input style="width: 40px;" type="text"/>	\$30.00 Each			
<input type="checkbox"/> Auto Fill Or Fill Line	<input style="width: 40px;" type="text"/>	\$30.00			
<input type="checkbox"/> In Floor Cleaning System	Number Of Domes <input style="width: 40px;" type="text"/>	\$85.00 Per Dome			
<input type="checkbox"/> Fountains Or Water Falls	Number Of Features <input style="width: 40px;" type="text"/>	\$30.00 Each			
<input type="checkbox"/> Trough For Endless Pool	Must Be Drained And Refilled	\$200.00			
<input type="checkbox"/> Close Sinks, Showers, Toilets In Pool House	Qty <input style="width: 40px;" type="text"/>	\$40.00 Each			
<input type="checkbox"/> Winter Chemicals	Kit Size _____				
<input type="checkbox"/> Mid Winter Service	Simply initial we will bill the day of service.			X	
					Subtotal _____

All final payments must be received the day work is to be performed. Someone must be home to sign and pay for all services rendered. Unless you have put a deposit by way of credit card, that same credit card will be used for any balance due and a receipt will be left at the house. For any other form of payment please have it ready the day we come for service.

Tax 8% on materials only _____
 50% deposite Required _____
 Total Balance Day Of Winterizing _____

Please note any additional things you would like us to address the day of winterizing. Additional charges may apply.

*** Please make payable to AAA Pools & Spas ***

Payment Method MasterCard / Visa Discover Check
 NOTE: If you use a credit card for deposit you are also authorizing final payment to be charged day of service. Unless someone is home to pay with a different form of acceptable payment, credit card will be charged.

Credit Card Number _____ Card Exp Date _____ Sec Code _____
 Signature _____ Printed Name _____
 Check Number _____ If you pay by check someone will need to be home to pay balance upon completion of service.

If there are any additional repairs needed, we can quote them and follow up later unless we have the time and the parts on the truck to do them that day. We will, however, need your authorization for any repair work above and beyond standard winterizing, unless you note repairs needed above. Due to weather and number of jobs AAA Pools & Spas LLC cannot guarantee a specific day. We will do our best to accommodate all requests. **Homeowners are responsible for all unpaid balances and are subject to a late charge of 2% per month and any collection and reasonable attorney fees that may be incurred by reason of non payment. Homeowners are also responsible for any permits needed to drain pool and for drainage access.**

Signature _____ Approximate Date of Winterizing _____
 I HAVE THE AUTHORITY TO SIGN FOR THIS SERVICE.