

Ashman – Gordon

Heating, Air & Electrical, Inc.
 P.O. Box 217 – Moneta, VA 24121
 Moneta Office: (540) 297-4945
 Bedford Office: (540) 586-0149
 Fax: (540) 586-2007
 Email Address: www.Ashmanshvac.com

Energy Saving Maintenance Agreement

Starting On:	
Expiration Date:	

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CUSTOMER NAME		
ADDRESS		
CITY	STATE	ZIP
PHONE	PHONE	
DAY	EVENING	

EQUIPMENT LOCATION		
ADDRESS		
CITY	STATE	ZIP
PHONE	PHONE	
DAY	EVENING	

EQUIPMENT	BRAND	AGE	MODEL #	SERIAL #	FILTER SIZE
					X X
					X X
					X X
					X X
					X X
					X X

TUNE UP INCLUDES

- | | | |
|--|--|--|
| <input type="checkbox"/> Clean & Adjust Burner Assembly | <input type="checkbox"/> Test Safety Controls | <input type="checkbox"/> Lubricate All Moving Parts |
| <input type="checkbox"/> Cleaning Ignition Assembly | <input type="checkbox"/> Clean or Replace Standard Air Filters | <input type="checkbox"/> Adjust Thermostat Calibration |
| <input type="checkbox"/> Cleaning Head Exchange & Elements | <input type="checkbox"/> Clean & Adjust Blower Components | <input type="checkbox"/> Clean Evaporator Coil if Accessible |
| <input type="checkbox"/> Monitor Flue Draft | <input type="checkbox"/> Measure the Current Air Flow | <input type="checkbox"/> Clean Condensate Coil & Drains |
| <input type="checkbox"/> Monitor Refrigerant Pressure | <input type="checkbox"/> Tighten Electrical Connections | <input type="checkbox"/> Measure Temperature Difference |
| <input type="checkbox"/> Test Starter Capabilities | <input type="checkbox"/> Measure Volts & Amps | <input type="checkbox"/> Clean Outside Unit |

Comments: _____

TERM LENGTH & COST

<input type="checkbox"/> ONE YEAR	<input type="checkbox"/> TWO YEARS	<input type="checkbox"/> THREE YEARS
\$ _____	\$ _____	\$ _____
# of Tune-ups _____	# of Tune-ups _____	# of Tune-ups _____

Payment Method: VISA MC DIS CHK# _____ TOTAL \$ _____

Account # _____ Exp. Date _____ CSC Code _____

We agree to provide you with a complete precision tune-up and professional cleaning annually or semi-annually as described above for your heating or air conditioning equipment.

Company Approval _____ Date _____

Customer Approval _____ Date _____