PA037544	-	
WV023939	DEL SUPPO, INC.	THIS IS A 2 PAGE FORM
MD124468	26 McKEAN AVENUE	PLEASE RETURN BOTH PAGES
OH 1999688	DONORA, PA 15033	
	724-379-5066	
	724-379-8550 FAX	
	www.delsuppopools.com	
	2017	
Company Policy: We will not schedule any work unless we have a current signed		
authorization form on file.		
PLEASE PRINT:		
NAME		
ADDRESS		
CITY		STATEZIP
PHONE	CELL	
WORK	FAX	
E-MAIL		
PERSON/S AUTHORIZED TO MAKE DECISION/S		
LINAT WITHOUT HOME OWN		(\$1000 00
LIMIT WITHOUT HOME OWN MINIMUM)	ERS AUTHORIZATION	(\$1000.00
INFORMATION: Following is f	for new customers or if chang	yes have been made to pool
POOL—YEAR & BUILDER NA	ME	
PLEASE CIRCLE ONE THAT APPLIES:		
TYPE OF POOL: VINYL LIN	NER FIBERGLASS	CONCRETE
COVER: AUTOMATIC	LOOP LOC TARP/WATER	RBAGS
FILTER: STA-RITE HAYWARD JANDY		
HEATER: JANDY RAYPA	K NATURAL GAS	HEAT PUMP PROPANE
CHEMICALS: CHLORINE TABS - TYPE OF TABS: SALT SYNERGY OTHER		

TERMS & CONDITIONS REGARDING SERVICE OF YOUR POOL By DEL SUPPO, INC.

We at Del Suppo, Inc. would like to thank you for the opportunity to service your pool. In order to eliminate any confusion, we have prepared this document to clarify our service policies:

- 1. All diagnostic & troubleshooting will be billed at \$140 per hour, plus the price of any materials used in the process, 2 hr minimum charge. A fuel surcharge will also be added.
- 2. Travel time is billed & included in the hourly rate.
- 3. Upon request, we will give you an estimate & the service will be performed on a time & material basis. We will do all we can to meet this estimate; however, this is only an estimate. Actual cost of repairing or serving your pool/spa may exceed this amount.
- 4. Upon completion of diagnosis, Del Suppo Inc. may require a deposit to include any labor, parts, freight & subcontractors required to complete the repair. All special order items are to be pre-paid. If you choose to use a credit card you will be required to bring the card into the store, otherwise fees may apply if card information is taken over the phone.
- 5. All equipment must be accessible at time of repair. Work area must be clean of patio furniture, toys, etc. Del Suppo Inc is not responsible for damage or loss to patio sets, fencing, sheds, etc. An additional fee will be assessed for reschedule.
- 6. Work orders are to be paid in full upon completion. You will be sent an invoice that is to be paid upon receipt. If you choose to pay by credit card, please call the office Amounts \$500 or more are subject to a 3% processing fee. Work orders that are not paid within thirty (30) working days of completion will be charged interest at the highest rate allowed by law. If legal action is taken for non- payment you will be responsible for all fees incurred. Your equipment may not be released until the work order is paid in full.
- 7. Customer must cancel two (2) days prior to scheduled service day. If Del Suppo, Inc. is not notified a \$50.00 fee will be applied.
- 8. If Del Suppo, Inc. is behind due to weather or unforeseen circumstances, we reserve the right to re-schedule.
- 9. Del Suppo, Inc. accepts: Cash, Checks, Visa, MasterCard & Discover. By signing below, you authorize Del Support, Inc. to charge your credit card to cover payment referred to above.
- 10. Del Suppo, Inc. offers a 30-day warranty on workmanship. Some parts carry a longer warranty, however, not the labor to replace the part(s). See manufacturer warranty.
- 11. Del Suppo, Inc. is not responsible for any loss or damage to pool/spa in case of fire, theft, flooding, or other causes beyond control. You should maintain insurance on your pool/spa to cover these losses.
- 12. Del Suppo, Inc. will administer & adhere to manufacturer's specific written warranty policies. Customer will be responsible for any item not covered by manufacturer's warranty including deductibles and or manufacturer's rejections. Some warranties require a stop fee which must be paid in advance.
- 13. Any issues with work performed must be reported within 7 days of completion, by calling the office.

SIGNATURE

WE ACCEPT MAJOR CREDIT CARDS: VISA/MASTERCARD/DISCOVER To pay with your credit card please complete the following and sign:

NAME ON CREDIT CARD_____

CREDIT CARD ACCT #_____ EXP____

3 Digit Authorization Code _____