

6710 F Ritchie Highway Glen Burnie, MD 21061 Phone (301) 209-0580 Fax (301) 209-0584

## 2013 HOME POOL SERVICE REQUEST FORM

Name:		Addres	ss:		
City: Sta  Day Phone: Night F		ate:	Zip code: _		
Fax:	E-mail:			Date Of Birth	
DELU 	XE PACKAGE: Chemicals included 15% discount on all parts Payments to be made as follows: Additional Weeklies	\$800.00 \$800.00 \$800.00 \$105.00/each	Upon Accep June 1 <sup>st</sup> July 1 <sup>st</sup>	,400.00	
	Winterization plugs not included				
STANI	DARD PACKAGE: Chemicals <u>NOT</u> included 10% discount on all parts Payments to be made as follows:	\$620.00 \$620.00 \$620.00	Upon Accep June 1 <sup>st</sup> July 1 <sup>st</sup>	.860.00	
<b>&gt;</b>	Additional Weeklies Winterization plugs not included	\$ 95.00/each			
OPEN.	/CLOSE ONLY PACKAGE: Chemicals NOT included 5% discount on all parts		\$	650.00	
<ul><li>*</li><li>*</li><li>*</li></ul>	Payments to be made as follows: With Spa, One Time Billing Antifreeze included Winterization plugs and algaecide	\$105.00	Upon Accep	ptance	
OPEN	ONLY PACKAGE: Chemicals NOT included		\$	350.00	
CLOS	E ONLY PACKAGE: Antifreeze included Winterization plugs and algaecide	not included	\$	350.00	
	Check Pack	age desired ab	ove and sig	n and date below:	
Signatu	ıre:		_ Da	te:	
		is contract contain			
			K IF YOU HAVE ANY OF THE FOLLOWING:		
Spa	Heater		ground	Inground	
Covers		Waterl	_	None	

## Please note some changes:

- by signing you acknowledge that Chesapeake Pools has recommended that your pool have dual drains or a vacuum release system and compliant VGB main drain cover as added safety measures to reduce the risk of suction entrapment. Moreover you expressly hereby forever release and discharge Chesapeake Pools, it's employees, servants, and/or agents from any liability that is related in any way to the dangers of suction entrapment.
- At time of scheduled opening, if the cover is removed and the pool surface and water are beyond our standard procedures to correct, there will be an added contract amount of \$550.00 for an acid wash (a.k.a. drain and clean). A drain and clean includes pumping out the water entirely and acid washing the sides and bottom of the pool. This is typically done if the algae build up and the debris in the pool is so great that a standard chemical cleaning would not be sufficient.
- ♦ If at time of opening we arrive and your pool is not at operational level (mid-way up the tile line) there will be an additional charge of \$100 for us to return to your residence.
- ♦ Vacuuming of your pool will be performed by our service technicians at the time of opening.

  However, depending on the condition of the water at the time of opening we can not guarantee that the pool will be "swim ready" upon completion.
- Since each pool and its components are individual, we can not guarantee a time frame for which the pool will be swim ready. Factors such as initial water quality, filter capacity, pump performance, disinfectant levels, and basic maintenance are all considerations.
- After the initial opening, adequate filter pressure, basic pump maintenance, and adequate disinfectant levels must be maintained by the homeowner in order to expedite the water clearing process.

<b>*</b>	Updated preference for paying by credit card. Authorizes Cheasapeake Pools to keep credit card
	information securely on file to run charges for any and all services.

This Box was intentionally left blank by Chesapeake Pools.

<i>□</i>	Weekly services run a 15-week period. Any weekly's done after the $15^{th}$ will be charged additionally depending on the package you choose
	Up to one hour of vacuuming is included on all packages. The rate for additional vacuuming beyond one hour is \$110/hour.
	Please have pool level filled to the top of the pool. Please remove excess debris and water from the cover before scheduled date of service or you will be charged additionally for removal at a rate of \$110/hour.
	The removal of leaves or debris from the pool at opening, closing or at weekly visits, that requires more than 1 hour of vacuuming, will be billed additionally at a rate of \$110/hour.
	Service calls are \$110/hour with a minimum of ½ hour.
	Please call for available opening and closing dates.
Seaso	on Openings include the following:
*	Removal, cleaning and storage of cover at your home
*	Installation of ladders, handrails, diving equipment, skimmer baskets and lids
*	De-winterization and start-up of filter system
*	Water analysis
*	Heater start-up if applicable (repairs, if needed, are additional)
*	Recommendation of necessary repairs and replacements
*	One hour of vacuuming
*	Cleaning of tile, deck and coping
Seaso	n Closings include the following:
*	Removal of portable pool equipment, upon owners request.
*	Drain and clean filter
*	Lower water level, drain pool piping and blow water out of lines
*	Water analysis
*	Remove and store motor on site if requested
*	One hour of vacumming, algaecide, anti-freeze added
*	Install cover
	n Weekly's include the following:
*	One hour of vacuuming
*	Balancing pool water (chemicals included only on Deluxe Package)
*	Clean tile and blow off deck
*	Skim surface and clean strainer baskets
*	Backwash system if needed Report any damages or repairs
Addit	cional Services: Please call for Details
*	Vinyl line repair or replacement
*	Sandblasting
*	Plastering (marbelite)
*	Leak Detection
*	Filter or pump repair or replacement
*	Heater repair or replacement
*	Automatic pool cleaner repair or replacement
*	Chlorine generators, ionizers
*	Pool covers
*	Coping and tile replacement

THANK YOU FOR CHOOSING CHESAPEAKE POOLS. WE HOPE TO MAKE YOUR SWIMMING SEASON AN ENJOYABLE ONE.

## PAYMENT AUTHORIZATION FORM

## Check one:

Charge m	ny:Visa _	MasterCard	American Express	Discover	
Account Num	ber:	Exp. Date:			
	3 or 4- (for Visa/M	digit Security code _ C - on back of card	; 4-digit on front of card)		
Please select one		selection is not mad by the credit card l	le we will assume that all isted.	services made to be	
	option 2. Please ru	un this card one time in this card only for in this card for all se	service package installme	ents.	
Name on Acco	ount:				
		Cardholder Billin	ng Address:		
		Street or P.(	). Box		
		City State	Zip		
Signature of C	Cardholder:				
	(Must h	ave on file before or	der can be processed)		
	Shipping	Address (if differen	t from billing address):		
		Street or P.O	O. Box		
		City State	Zip		