Safety and Maintenance Agreement

ASTRO HEATING & COOLING
7487 Pierside Drive, O'Fallon MO 63368
Phone: 314-438-1560 • Email: astro_hvac@hotmail.com

Congratulations on your investment in one of the most comprehensive service agreements available anywhere.

With this agreement, you are now considered a ***Preferred Customer*** which entitles you to absolute priority service, extended warranties, cash discounts, and most importantly, ***peace of mind.***

The purpose of this plan is to provide you with enhanced equipment safety and efficiency, as well as extend the life of your equipment. You will also appreciate knowing that your equipment has been tested for carbon monoxide gas leaks.

This agreement entitles you to benefit from our exclusive 23 point precision tune-up and professional cleaning. Here is just a **sample** of our procedures:

-Check and calibrate thermostat
-Check and vacuum blower and fan assembly
-Wash condenser coil
-Replace or wash standard air filters
-Lubricate all moving parts
-Adjust all drive belts and pulleys
-Test all safety control devices
-Test, secure, and tighten all electrical connections and terminals
-Test humidifier operation and set damper switches and valves
-Clean heat exchanger, burners, and pilot assemblies
-Inspect heat exchanger, flue assembly, burners, and draft dampers
-Vacuum clean all combustion, flue, and blower compartments
-Adjust all main air dampers
-Activate heating or cooling system
-Test all motors, starting capacitors, run capacitors, and potential relays
-Test, measure, and record operating temperatures and pressures
-Test for monoxide gas leaks
-Test for gas leaks at furnace
-Provide complete written analysis of our findings along with any recommendations that we may have

Name:	No:
Address:	
City: / St:	Zip:
Hm Phone:	Wk Phone:
Email:	

Equipment	Make	Model	Serial	Notes	Y/N

☐ Heating System Only ☐ Cooling System Only ☐ Complete Comfort System

☐ E.A.C. ☐ Other Air Cleaner, Type: Size: x x qty

☐ Humidifier Type:

Other Notes:

ABSOLUTELY NO RISK MONEY - BACK GUARANTEE & TERMS

YOUR ACCEPTANCE AND METHOD OF INVESTMENT

I/we agree to receive { } Visits over the next { } year(s) for a total of $

☐ Cash ☐ Check, no: ☐ Credit Card, type:

Account no:	Exp. Date:
Company Approval:	Date:
Customer Approval:	Date:
Print Name:	