



2228-B Rees Street Extension
 Breaux Bridge, Louisiana 70517
 Phone 337.332.1861
 Fax 337.332.1868
 www.acadianapools.com

Pool and/or Spa "Worry Free" Annual Maintenance Contract

CustomerName: _____ Home #: _____
 Address: _____ Mobile #: _____
 City, State&Zip: _____ E-Mail #: _____
 JobName&Location(if different): _____
 Contact: Pool Size: _____ Sanitizer: _____
 Contract Dates: _____

Your pool and/or spa service is set for:

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Weekly Service (\$35 per visit) |
| <input type="checkbox"/> Tuesday | <input type="checkbox"/> Bi-Weekly Service (\$45 per visit) |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> Monthly Service (\$60 per visit) |
| <input type="checkbox"/> Thursday | <input type="checkbox"/> Monthly Service October through March & Weekly |
| <input type="checkbox"/> Friday | or Bi-Weekly Service April through September |

Acadiana Pools will perform the following services for your pool and/or spa:

- | | |
|---|--|
| 1. Water chemistry tested and recorded | 7. Pool brushed as needed |
| 2. Chemicals added as needed* | 8. Pool surface skimmed |
| 3. Clean pump, skimmer & cleaner baskets | 9. Equipment inspection |
| 4. Backwash filter and monitor operations | 10. Salt cell Inspection (if applicable) |
| 5. Pool vacuumed as needed | 11. Adjust pool water level |
| 6. Tile cleaned as needed | 12. Make recommendations as needed |

All services are performed as needed at each visit for all plan levels. *Chemicals required to maintain proper water chemistry will be brought out as needed and added to the monthly service charge at 10% off regular retail prices. Additional services provided upon request will be charged at 10% off regular service department rates.

Acadiana Pools will furnish labor and equipment to complete the pool and/or spa services in accordance with the above specifications, for the sum of \$____ per month, plus chemicals. A credit card is required for all service plans and will be billed at month's end for the previous month's services.

Name on credit card: _____
 CC #: _____ Expiration: _____
 Signature: _____ Date: _____

ACCEPTED: The above prices, specifications and conditions are satisfactory and are hereby accepted. Acadiana Pools is authorized to do the work as specified. Payment will be made as outlined above.

Customer Signature: _____ Date: _____
Acadiana Pools Rep: _____

Note: This proposal may be withdrawn if not accepted in 30 days.#