

SERVICE CONTRACT

2018

609-443-0828

609-426-1881 fax

www.windsorpool.com

Thank you for choosing the Windsor Pool Shop for your pool/spa needs. Please fill in all of the information below. Sign and date this form and return it to our office at the above email address or fax number.

Customer Name: _____ Date: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ Cell: _____

Email: _____

Service to be performed for: (check all that apply) ___ Spa ___ Pool

Describe Service/Repair requested: _____

By signing this agreement, I hereby authorize The Windsor Pool Shop to perform the work necessary on my pool/spa and agree to pay for the parts and labor charges as billed. I agree to pay the credit card company and not dispute the charges with them even though my signature is not on the individual credit card receipts. I fully acknowledge that I am signing this credit card authorization OUTSIDE OF THE RULES AND REGULATIONS OF MY CREDIT CARD COMPANY AS LISTED BELOW. AN IMPRINT OF MY CREDIT CARD AND /OR MY SIGNATURE IS NOT POSSIBLE TO FACILATATE THIS TRANSACTION. In the event the credit card charge is declined, I agree to pay these charges upon receipt of an invoice for them. Payment in full is due at the time service is performed. A late payment will be charged a finance charge of 1.5% per month. A check returned for NSF will incur a \$35.00 fee. The customer is responsible for all court costs or attorney fees if the account goes into collection. The Windsor Pool Shop will advise customer of the estimated costs of all repairs, but reserves the right to revise the estimate if additional service is necessary.

YES, I have read the above conditions and agree to them.

Signature: _____ Date: _____

Credit card # _____ Security Code: _____ Exp Date: _____

Name on card: _____ Card Type: _____

*** Authorized use of this credit card will remain on file and used for future services unless otherwise notified by the customer.**

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