

	SELECT SAVER	SILVER	GOLD	PLATINUM	WARRANTY 1	WARRANTY 2	WARRANTY 3
Annual Contract Cost	\$99.00	\$150.00	\$200.00	\$280.00	\$400.00	\$500.00	\$600.00
Monthly Installments	N/A	\$14.50	\$18.66	\$26.34	\$36.00	\$45.00	\$54.00
Appointment Fee (if necessary)	\$40.00	\$30.00	\$20.00	\$10.00	Included	Included	Included
Service Call Fee	\$75.00	\$65.00	\$35.00	\$10.00	Included	Included	Included
Emergency Service Call (weekend, holidays, non business hours)	\$125.00	\$125.00	\$125.00	\$125.00	\$75.00	\$75.00	\$75.00
Inspections/Year	3	3	3	3	3	3	3
Inspection of Listed Components *	✓	✓	✓	✓	✓	✓	✓
Air Compressor Cleaned		✓	✓	✓	✓	✓	✓
Irrigation pump filter cleaned			once per contract	once per contract	✓	✓	✓
Sprinkler head filters cleaned & adjusted			✓	✓	✓	✓	✓
10% discount parts (excludes Norweco, Jet and special order parts)				✓	✓	✓	✓
Choice of 10lb bucket of chlorine or 1 year supply of waste digestant				✓	✓	✓	✓
All Mechanical parts repaired or replaced at no cost					✓	✓	✓
All Electrical components repaired or replaced at no cost						✓	✓
All reclaimed water piping repaired at no cost							✓
Pump out of system - covered every 3-5 years after initial year of Warranty 3 coverage							✓

* Inspection of aerator(s), irrigation pump(s), disinfection device, chlorine supply, electrical circuits, distribution system, spray field vegetation, sludge reading from pump tank and overall condition of system.

Labor rates are \$100/hr for 1st person and \$25hr additional per person on job. Billed at 1/4 hr increments

- Our warranty 1, warranty 2 and warranty 3 plans are inspection plans and extended warranty plans on 500 gallon per day aerobic spray plants and cover these parts as indicated:

- Mechanical items are water pumps and air compressors. These warranty plans do not cover aerators manufactured by Jet or Norweco, we can use a aftermarket part or if unit can be rebuilt we will consider it on a case by case bases or prorate the item. We will not cover Norwecos' Bio Kinetic Filter.

- Norweco systems - The Bio Kinetic filter is cleaned at an hourly rate in 15minute increments. Customer can request cleaning of this device at every service or as per requested. We will not be responsible for device breaking when removed or reinstalled.

- Electrical components are control panel, and wiring from control panel to pump tank.

We will not cover any fixed film or media devices.

- These warranty plans do not cover pre existing conditions, accidental damages/improper usage, acts of nature (floods, wind, tornadoes, snow, ice, drought, lightning), overloads, ants/rodents, unauthorized repairs, theft or anything that is not considered normal operation of the system.

- We will not cover pumping due to overloading of system or because of leaky tanks.

- Norweco systems - The Bio Kinetic filter is cleaned at an hourly rate in 15minute increments. Customer can request cleaning of this device at every service or as per requested. We will not be responsible for device breaking when removed or reinstalled.

- We will not cover poor installation methods, leaky tanks, leaky risers, failing tanks, or sewage lines.

BJWSI will not be held liable or responsible for any sickness, health issues, death or any other damages that may directly or indirectly relate to the OSSF system.

- Contract can be terminated by BJWSI if payment is not made. In the event if payment(s) are not made your contract will be terminated and if any repairs were made such as chlorine delivered, parts installed or any other charges that were incurred you will be billed for full amount of these items including labor costs. We do not extend lines of credit unless a credit application is filled out and your credit application is approved.

- We will match any competitors rate and plan within reason, they must have in writing what duties they perform and for what price in order for us to match their prices; we have the right to turn down any contract and to not meet their prices if we find their rates not reasonable.

If paying by check make check payable to B & J Wakefield Services, Inc.

Credit card type (circle one):    Credit Card Number: _____

Name as it appears on credit card: _____ Expiration Date: _____

CCS Code: _____ Billing Zip Code: _____

Plan Chosen: _____ Full Payment or Monthly Deduction: _____

Authorized Signature: _____