

MONTAUK POOL & SPA

BENNETT POOLS

P.O. Box 549 Montauk, NY 11954 (631) 668-1119/329-1110

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Dear Pool and Spa Owner:

The season we have all been waiting for is soon approaching. It is time to open your swimming pool and spa. Please read the following carefully and sign in the appropriate spaces. Then return the bottom part of this form and your deposit of \$350.00 dollars promptly to insure the date that you wish.

Sorry, but NO service can be performed without signed authorization.

NOTE THE FOLLOWING TERMS

All summerization and service calls must be paid in full within 30 days of billing date. Interest at 1.5% per month, 18% per year will accrue on all outstanding balances after 30 days. ALL SERVICE MUST BE SUSPENDED SIXTY DAYS FROM THE BILLING DATE ON OUTSTANDING ACCOUNTS. We accept cash, personal check, Visa, MasterCard, Discover and American Express for payment.

Homeowners are responsible for all payments in tenant situations; we recommend an allowance of two thousand dollars from the security deposit for seasonal pool service. Montauk Pool & Spa / Bennett Pools services many rental accounts on the East End and realize the importance of tenant happiness.

OPENING, WEEKLY SERVICE, CLOSING

A price list for these services and additional services are provided on our website or with the spring letter mailing.

DESIRED DATE OF OPENING:(the date you want to swim)

Opening of pool includes remove, clean, and fold cover. Install pump, ladders, lights, baskets, and diving board. Grease all parts, fill pool (your water), prime and start pump. Completion of opening does mean your pool will be swimmable and clean.

Please note many pools can be opened within a 2-3 week period, however to ensure your satisfaction Montauk Pool & Spa / Bennett Pools requests a 4-5 week lead period. On the East End utility costs are always a concern so please be assured your Pool & Spa will run only the most time necessary to bring the Pool & Spa to a clean and swim-able condition during the opening process.

WATER AND ELECTRIC ACCESSIBILITY REQUIRED

Name: _____ Date: _____ Telephone# _____

Address: _____

Signature: _____

Any repairs that might be needed to ensure proper filtration or heating will be submitted to the owner with a price estimate if the repair will exceed \$925.00.