

Service Order Agreement

by and between

(Company Name)

A New York based limited liability company with offices at

_____ and

_____ with offices at
_____ (“Customer”).

Customer Details:

Contact Name: _____

Email: _____ Phone: _____

Accounts Payable Name: _____

Email: _____ Phone: _____

Doing Business As: _____

Installation Address: _____

Delivery Address: _____

Special Conditions:

Payments are made annually in advance with first payment due on Installation Date or when the Service Agreement is purchased.

One Year Term / Two Year Term / Three Year Term / Four Year Term / Five Year Term / Six Year Term

Annual pricing increases after the first year.

Annual Maintenance includes 2 x maintenance calls and filter replacement. Reactive Service included.

SYSTEM TYPE

Quantity: _____

Service Order Agreement

Year 1 Annual Per System:

Year 2 Annual Per System

Year 3 Annual Per System

Year 4 Annual Per System

Year 5 Annual Per System

Total:

SYSTEM TYPE

Quantity: _____

Service Order Agreement

Year 1 Annual Per System:

Year 2 Annual Per System

Year 3 Annual Per System

Year 4 Annual Per System

Year 5 Annual Per System

Year 6 Annual Per System

Total:

SYSTEM TYPE

Quantity: _____

Service Order Agreement

Year 1 Annual Per System:

Year 2 Annual Per System

Year 3 Annual Per System

Year 4 Annual Per System

Year 5 Annual Per System

Year 6 Annual Per System

Total:

The undersigned confirms that s/he has read and agrees to the term of this Service Order Agreement, and is authorized to enter into said Agreement in behalf of the Customer with (Company name) and is a duly authorized signatory for Customer.

Company Name

Customer

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

SELECT PAYMENT METHOD

CHECK – Subject to credit approval

ACH and Credit Card

Payments will be withdrawn during the first week of the month on each anniversary of the Service Agreement.

ACH – See attached ACH form for payments.

CREDIT CARD INFORMATION:

Amex Visa MasterCard

Name on card: _____

Card Number: _____

Expiration Date: _____

Billing Address: _____

The undersigned approves the use of the above card for all subsequent rental payments.

Cardholder signature: _____ Date: _____

AUTHORIZATION AGREEMENT FOR ELECTRONIC DEPOSIT (ACH)

I (we) hereby authorize 'XYZ' hereinafter referred to as the Company, to initiate debit entries to my (our) Checking Account Savings Account (select one) indicated at the depository financial institution named below, hereafter called Depository, and to debit the same to such account.

I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name _____ Branch _____

City _____ State _____ Zip Code _____

Routing Number _____ Account Number _____

This authorization is to remain in full force and effect until the Company has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Company and Depository a reasonable opportunity to act on it.

Name(s) _____ (Please Print)

Address _____

City _____ State _____ Zip Code _____

Date _____ Signature _____

Remittance E-mail Address _____

Please submit a void check with the ACH Authorization form