

CARE Heating and Cooling

CARE Maintenance Plan

Client Name: _____ Client E-mail: _____

Client Address: _____

Covered Equipment: _____

This CARE Plan agreement is between the client named above and CARE Heating and Cooling, Inc. ("CARE") for the purpose of annual maintenance and savings for the heating and/or air conditioning equipment at the above address ("Covered Equipment") from ___/___/_____ through ___/___/_____.

Please select one of the following CARE Plans (pricing listed is for each Furnace/AC or Heat Pump system):

CARE Plan \$269/year - or - \$20/month (Save \$29)
<ul style="list-style-type: none">✓ Two semi-annual tune ups (one for cooling, one for heating)✓ 50% off Service Call Fee✓ Extended one-year warranty on parts and labor for repairs✓ 10% Discount on any repair✓ \$500 off any air conditioner or furnace replacement✓ Priority scheduling for service calls

CARE Premium Plan \$359/year - or - \$27/month (Save \$35)
<ul style="list-style-type: none">✓ Two semi-annual tune ups (one for cooling, one for heating)✓ No Service Call Fee✓ Extended one-year warranty on parts and labor for repairs✓ 20% Discount on any repair✓ \$750 off any air conditioner or furnace replacement✓ Priority scheduling for service calls

CARE Labor Plan Included in furnace and/or AC replacement	*Exclusively for new equipment installed by CARE*
<ul style="list-style-type: none">✓ Labor for service on covered equipment✓ No service call fee for covered and related equipment✓ One (1) annual system tune up✓ Fees for first three (3) years of labor plan included	<ul style="list-style-type: none">✓ Priority scheduling for service calls✓ See full terms and conditions listed on CARE Labor Plan

Signature: _____ Date: _____

Selection(circle one): CARE Plan (\$269/year) CARE Plan(\$20/month*) CARE Premium Plan(\$359/year) CARE Premium Plan (\$27/month*)

Number of HVAC systems: _____ Payment Type (check one): Check _____ Credit Card _____

Card Number: _____ Expiration Date: ____/____ Billing Zip: _____

I hereby authorize CARE to charge the above credit card or debit card for any CARE Plan payments due. I have read and agree to the terms and conditions of this CARE Plan agreement. *Must be paid by credit card Updated: 4/2024



"When you need a company you can trust!"



1-800-COOLING

5750 Chandler Court | Westerville, OH 43082

www.careheatingandcooling.com