

# Henry's Service All

1012 Luke Street Irving, TX 75061  
Office: 972-986-4006 Fax: 972-986-3677  
[www.HenrysServiceAll.com](http://www.HenrysServiceAll.com) [HenrysServiceAll@verizon.net](mailto:HenrysServiceAll@verizon.net)



## HVAC SERVICE CONTRACT

- INCLUDES THE FOLLOWING FOR **ONE UNIT-CAN BE DOUBLED IF THERE ARE TWO UNITS.**
- 2 SERVICE CALLS - ONE IN THE SUMMER AND ONE IN THE FALL
- 2 A/C FILTERS FOR HONEYWELL BASE UNITS
- 10% DISCOUNT ON A/C & HEAT REPAIRS.
- SATURDAY AT REGULAR LABOR RATES (8:00AM TO 5:00PM)
- SUNDAY AT TIME & 1/2 LABOR RATES (8:00AM-5:00PM)

CHECK THE OPTION THAT APPLIES TO YOU: **\*\*NEW REDUCED PRICING\*\***

- (A) \_\_\_\_\_ \$19.00 A MONTH or \$215.00 PIF (FOR TWO VISITS) WITH 1" PLEATED FILTERS (2 total)  
(B) \_\_\_\_\_ \$25.00 A MONTH or \$290.00 PIF (FOR TWO VISITS) WITH 4 3/8 PLEATED FILTERS (2 total)  
(C) \_\_\_\_\_ \$27.00 A MONTH or \$310.00 PIF (FOR TWO VISITS) WITH SPECIALTY SIZED FILTERS (2 total)

Customer Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Tech: \_\_\_\_\_ Date: \_\_\_\_\_ Invoice # \_\_\_\_\_

Contract Runs from: \_\_\_\_\_ to \_\_\_\_\_ Service Call #1 \_\_\_\_\_ and #2 \_\_\_\_\_

Unit #1 \_\_\_\_\_  
FURNACE: MODEL # \_\_\_\_\_  
CONDENSER: MODEL # \_\_\_\_\_  
COIL: MODEL # \_\_\_\_\_

FILTER SIZE: \_\_\_\_\_  
SERIAL # \_\_\_\_\_  
SERIAL # \_\_\_\_\_  
SERIAL # \_\_\_\_\_

Unit #2 \_\_\_\_\_  
FURNACE: MODEL # \_\_\_\_\_  
CONDENSER: MODEL # \_\_\_\_\_  
COIL: MODEL # \_\_\_\_\_

FILTER SIZE: \_\_\_\_\_  
SERIAL # \_\_\_\_\_  
SERIAL # \_\_\_\_\_  
SERIAL # \_\_\_\_\_

### Recurring Debit/Credit Card Payment Authorization:

I, \_\_\_\_\_, Authorize Henry's Service All to make an automatic Monthly Charge to my Debit/Credit Card for the Service Agreement in the amount of \$ \_\_\_\_\_.

Debit/Credit Card # \_\_\_\_\_ Exp \_\_\_\_\_ Security Code \_\_\_\_\_

\*I will advise Henry's Service All of the new Expiration Date when my Debit/Credit Card expires. INITIAL \_\_\_\_\_

Customer TX DL OR ID: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

\*By Signature - customer agrees to charge for the above marked Service Contract and understands that this is a Non-Refundable charge. INITIAL \_\_\_\_\_

SERVICE CALL REGULAR LABOR RATE IS \$110.00 TIME & 1/2 IS \$165.00 DOUBLE TIME IS \$220.00 TRIP CHARGE IS \$18.00

**REMEMBER WE DO PLUMBING, ELECTRICAL, HVAC AND WHOLE HOUSE REMODELING!!!**

### License Information:

Texas State Board of Plumbing Examiner  
PO Box 4200  
929 East 1<sup>st</sup> Street  
Austin, TX 78765  
License # M-14612 Henry Nuckolls, RMP

### Electrical Contractor

License # TECL 22933

Texas Department of Licensing and Regulations

PO Box 12157  
Austin, Texas 78765  
800-803-9202

### A/C & Refrigerant

License # TACLA 004331E