

COMPLETE CUSTOMER CARE MAINTENANCE PLAN



**ARIZONA'S
DUKES
OF AIR LLC**
Air Conditioning and Heating

Customer Name: _____
Address: _____
City _____ State: _____ Zip: _____
Phone (H) _____ (W) _____
Email _____

(480) 773-6565

Technician Name: _____ Contract Date: _____

From **\$ 8.99 per Month ***

CCC GOLD PLAN

- 5 YEAR TERM
- 20% discount on parts/services
- \$450 off a new HVAC system
- \$ 19.95 Diagnostic
- Paid in full at plan start date
- **(Best Value) \$8.99 MO./\$107.88 yr.**
- 2 yr. warranty on replacement parts

CCC SILVER PLAN

- 3 YEAR TERM
- 15% discount on parts/services
- \$350 off a new HVAC system
- \$29.95 Diagnostic
- Paid in Full at plan start date
- **(Better Value) \$10.99 MO./\$131.88 yr.**
- 1 yr. warranty on replacement parts

CCC BRONZE PLAN

- 1 YEAR TERM- minimum
- 10% discount on parts/services
- \$250 off a new HVAC system
- \$39.95 Diagnostic
- Pay monthly w/ Credit Card or Pay in full
- **(Good Value) \$12.99 MO./\$155.88 YR.**
- 1 yr. warranty on replacement parts

COMPLETE CUSTOMER CARE
ADVANTAGES

- Semi Annual Maintenance (Spring/Fall)
- Ensure Manufacturer Warranty stays in Effect
- Maximizes system performance
- Extend Equipment Life
- Available SUNDAYS for policy holders
- Same day PRIORITY Service (*no more than 24 hrs from when call is placed*)
- Transferable if you move **
- Verify Condensate line(s) clear
- Condenser Unit(s) washed

** Membership fee per each heating & cooling system. Pricing starts at \$8.99 to \$12.99 and requires a one-year minimum agreement. Discount does not apply to refrigerant and Maintenance Plan is non-refundable if cancelled before contract expiration date.*

***CCC can be transferred to your new property if new property is in our service area.*

Equipment	Make	Model Number	Serial Number	Year

Automatic Credit Card Deductions

Visa
 Master Card
 Discover

of Units
 x
 Monthly Cost
 =

 x
 Months
 =
 INVESTMENT \$

Account _____

Card Code: _____ CC Zip: _____ Exp Date: _____

I hereby authorize Arizona's Dukes of Air, LLC to draft the monthly investment of \$_____ from the above account that I have selected or full investment of \$_____. I understand this will take place starting on _____. Furthermore, I understand that the monthly fee will continue until 30 days after a written notice of termination is received from the customer after the coverage term has been satisfied.

Client Signature: _____ Date: _____
 Rep. Signature: _____ Date: _____