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PREVENTATIVE MAINTENANCE PLAN

Name		
Address		
Email		
Phone (Home)	(Cell)	(Work)
Please complete the follow	ving:	
Type of Service:		Billing Frequency:
Home (\$9.95/month)		Monthly
Business (\$14.95/month)		Quarterly
		☐ Annually
Method of Payment:		Invoices for Cash or Check payments will be sent on the 30th of each month and are due by the 10th. All credit card payments will automatically be processed on the 10th of each month <i>(no invoice will be mailed)</i> . A separate Credit Card Authorization Form is required for all credit card transactions.
□ Cash		
Check		
Credit Card		

• Preventative Maintenance Plan is for a period of One (1) Yea and will automatically renew unless notified in writing at least 2 weeks prior to your renewal date.

•Your inspection should be scheduled within Two (2) Weeks of signing up. Our office will contact you to schedule an appointment. The \$59.95 fee is due at time of inspection. Reports will be sent within 3 business days.

•Should you wish to terminate your Plan before the renewal date a \$65.05 early termination fee will be charged.