



OH Lic. #21356

1650 Commerce Rd.
 Springfield, OH 45504
 P - 937.323.2300
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 DeLongAir.com

Heating & Air Conditioning Specialists

Congratulations! You are one step away from increasing the efficiency, function & longevity of your HVAC system. We agree to provide Smart Homeowner Club Members with a complete precision tune-up & cleaning (annually or semi-annually as applicable) for your heating, air-conditioning or indoor air quality equipment.

A Smart Homeowner Club Member receives these benefits:

- No service charge
- No overtime charge for emergency service
- 15% discount on labor & parts
- \$250 credit for complete replacement of heating and cooling system
- 10% off home comfort accessories
- Lower heating & cooling bills
- Increased equipment capacity
- Longer equipment life
- 24/7 phone operators
- Increased comfort
- Compliance of system warranties
- Updated consumer information
- Improved safety
- Transferable should you move

Services Performed

Inspection of:

- Air filters
- Cooling Coil
- Burners
- Flue draft
- Pilot
- Thermostat
- Blower & Bearings
- Condenser & Fan
- Heat Exchanger

Testing of:

- Safety controls
- Ignition
- Thermocouple
- Check and flush drain
- Check voltage/amperage
- Tighten electrical connections
- Adjust air flow & gas pressure
- Clean flame rod
- Geothermal operations

AND MUCH MORE!

NAME/ADDRESS/CITY/STATE/ZIP	LOCATION OF EQUIPMENT
EMAIL	
PHONE	

Item/Description	1 year	2 year
Gas Furnace	85.00	165.50
Electric Furnace	85.00	165.50
Gas/Electric Boiler	90.00	175.50
Fuel Oil Equipment	112.00	220.00
Air Conditioner	90.00	175.50
Heat Pump	95.00	185.50
Geothermal (service 2x/year)	190.00	369.50
Humidifier	38.00	76.00
Media Filter Replacement (each)	48.00	94.40
Carbon Monoxide Test	30.00	57.00
Clean Electronic Filters (1x)	45.00	86.00
Combustion Analysis	40.00	76.75
2 or more furnaces per home	- 10.00	- 20.00
2 or more air conditioners per home	- 10.00	- 20.00
Other		
Total		
Amount Due		

Membership Acceptance

_____ / ____ /20
 Customer Signature Date

Method of Payment:

MC Visa AmEx Disc Check Cash Payment \$ _____

Account/Check # _____ Exp. __/__/__

Company Approval: _____ Date __/__/__

Customer Approval: _____ Date __/__/__

Please sign & mail or fax copy to us. Retain bottom copy for your records. Membership begins when payment is received. After-hours service calls for emergencies only. Any questions, please call 323.2300. Thank You!
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