



1353 Riverdale Street
West Springfield, MA 01089

Phone: (413) 266-2774 Fax: (413) 455-1727
www.MrPoolandSpas.com

PRICES SUBJECT TO CHANGE DEPENDING ON POOL TYPE, SIZE OR JOB LOCATION. IF EQUIPMENT PARTS ARE MISSING OR BROKEN THERE MAY BE AN ADDITIONAL CHARGE FOR THE REPLACEMENT

*****CLEANING & BALANCING IS NOT PART OF OUR CLOSING PROCEDURE*****

PLEASE CHECK ALL THAT APPLY:

- In Ground Pool – Vinyl Liner **\$360**
 - Standard Tarp Cover
 - Safety Cover

- In Ground Pool – Gunite/Concrete **\$540**
 - Standard Tarp Cover
 - Safety Cover

- Integrated Spa (uses pool equipment) **+ \$110**

- In-floor Cleaning System: **+ \$95**

- Above Ground **\$340**

- *Do you wish to have acid wash performed?
 - Filter **\$164**
 - Salt Cell **\$134**

Where will all winter items be located? (cover, plugs, gizmos, etc.)

Where would you like us to store your equipment? (pump, filter, etc.)

Where can we pump water to lower it to winterizing depth?

How many skimmers does the pool have? _____

Is pool equipped with a diving board? Would you like it removed?

- Does pool have a low wall suction inlet?
 - Yes
 - No

- Does pool area have a separate water line that needs to be blown out/winterized? **+ \$140**
 - Yes
 - No

*Normal closing includes taking the filter apart (Cartridge or DE) and rinsing off the element only.



PAYMENT IN FULL is required at the time of your closing. We have maintained our policy in which we must have a credit card on file prior to performing this service. You may still pay on-site with a personal check if you wish, and your credit card will not be charged. If you will not be home, please leave payment in a designated area. If no payment is made at the time of service, the office staff will run the credit card on file for the outstanding balance for your convenience. We accept MasterCard, Visa, Discover, and American Express. If you do not wish to provide a credit card to be kept on file, payment must be received *prior* to services being rendered. **A MESSAGE FROM BRIAN JULIANO:** I know this policy is a sensitive topic. Please feel free to contact me on my cell phone, which is 860-729-6869 to discuss any questions or concerns you may have regarding this policy.

Billing Information:

Name (as it appears on card): _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone (Home): _____ Phone (Mobile): _____

Date Requested: _____ E-Mail: _____

Credit Card: _____ - _____ - _____ Exp: ____/____ CVV: _____