

WEEKLY POOL SERVICE CONTRACT

Let the Local Pool Pros Handle Your Weekly Pool Maintenance!

- Manual vacuuming with our own equipment performed by uniformed employees
- The most advanced water testing system for precise use of wet chemistry methods ever produced. This is not a test strip. We test for the top 10 chemicals in the industry and balance them to recommended standards
- Real time managerial oversight from a certified maintenance specialist of pool chemicals and services rendered for quality assurance
- Adding chemicals as needed. Must use Pools & Spas Service, Inc. chemicals.
- Maintenance of entire pool: including backwashing (noting of filter pressure before and after), emptying of skimmer and pump baskets, skimming of pool, cleaning of scum line, and brushing of walls (if needed)
- **Service includes up to 1 ½ hours.** Additional time will be charged at \$75 per man, per ½ hour.*



If the pool is green and there is no visibility the above service will include everything except for the vacuuming and will be billed at \$125 plus the cost of chemicals.

_____x (Initial) (Pool needs to run 24 hours a day until pool is clean and swimmable to expedite the clean up of the pool)

If the pool is green you will need multiple consecutive services.

_____x (Initial)

I authorize Pools & Spas Service, Inc. to take photos at each visit for quality assurance and monitoring.

_____x (Initial)

*Prices are based on a standard pool that is approx. 800 sq. ft. There will be an additional charge for chemicals as needed.

Weekly Service (Consecutive)	Prepaid Price	Total
1-2 Services Prepaid	\$350 Per Visit	
3-5 Services Prepaid	\$200 Per Visit	
6-11 Services Prepaid	\$175 Per Visit	
12+ Services Prepaid	\$165 Per Visit	
Portable Spa Add	\$75 Per Visit	
Chemical Service (No Vacuum)	\$125 Per Visit	
Chemicals are not included in the above pricing and are billed at each service.		
Prices subject to change without notice. All services must be prepaid.		
Contractor #13VH00404200		
	Subtotal	
	Sales Tax 6.625%	
	TOTAL	



Name: _____

Address: _____

Phone: _____

Email: _____

Payment Type: ☐ Check ☐ MasterCard ☐ Visa ☐ Discover

Credit Card Number: _____

Exp. Date: ____ / ____ / ____ V-Code: _____ Signature: _____

Date: ____ / ____ / ____



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