



**Heating and Air Conditioning Cal Lic #814817**  
 10465 San Fernando Rd. Unit # 7, Pacoima, CA 91331  
 Tel (818) 896-7777 Fax (818) 896-7771  
**Residential, Commercial, Service, Repair**

Dear Customer,

Thank you very much for allowing us to do the preventative maintenance for your 7 units.

We would like to invite you to take part in our service maintenance and 22 point inspection program.

It is very important to maintain and service the unit at least twice a year. An efficiently operating air conditioning and heating can help you save money on your utility bills and you will enjoy the peace of mind that comes from being prepared.

Maintenance covers the following:

Oil Leaks	Check the condenser	Check condensation pump
Duct Leaks & Cracks	Replace the filters	Drain system
Evaporator Fan	Verify the refrigerant quantity	Check A/C relays and
Check Freon	Clean condenser coil	Contractors
Check Furnace burner and	Thermostat Calibration	Check Controls and safeties
Gas Flow	Time Clock setting	Check Temperature and
Inspect Motors	Fan Belts	Performance
Evaporative coil	Electric wiring connection	Expansion valve setting
Furnace		

Please find the enclosed Service Maintenance Agreement form. Upon acceptance, please sign and return one copy to us via fax (818) 896-7771.

Thank you very much.

Sincerely,

**Rody Shirom**  
 Operations Manager



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**SERVICE MAINTENANCE AGREEMENT**

Rody Air Heating & Air Conditioning will furnish the materials and perform the labor necessary for the service and inspection at the property address of:

Owner:

Address:

Number of systems to be serviced:

Make/Type & Size of the Unit:

Date of 1<sup>st</sup> Service:

Date of 2<sup>nd</sup> Service:

The above service maintenance shall be performed 2 times a year, in a substantial workmanlike manner to standard practices for the sum of **\$139.99 x units.**

**TOTAL AMOUNT CHARGED FOR THIS AGREEMENT: \$139.99 x = \$ per year**

**ACCEPTANCE OF AGREEMENT**

Upon acceptance, please sign and return one copy to us. Thank you very much.

**AUTHORIZED PERSON:**

\_\_\_\_\_  
Printed Name & Signature

\_\_\_\_\_  
Date

**Please make all payments payable to RODY AIR INC. to schedule your 1st appointments.**