



HEATING | COOLING | ELECTRICAL | PLUMBING

Silver Club Signup

Name (cardholder) _____ Date _____ Plan Level _____

Address _____ City _____ State _____ Zip _____

Phone _____ Cell Phone _____ Email _____

Credit Card # _____ Exp. Date _____

Automatic credit card/debit. I understand that the monthly fee will continue until a written notice of termination is received at the corporate office.

Client Signature _____ Date _____

Company Representative _____

Equipment list

Furnace model # _____ Serial _____

A/C condenser model # _____ Serial _____

A/C Coil model # _____ Serial _____

Filter Model # _____ Serial _____

Thermostat model # _____ Serial _____

Humidifier model # _____ Serial _____

Condo Pump model # _____ Serial _____

Zone panel model # _____ Damper _____

Ultraviolet Light model # _____ Serial _____

Water Heater model # _____ Serial _____

Number of Smoke detectors _____ Battery type _____

Garage door opener Type _____

Generator model # _____ Serial _____

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