

TREATMENT SYSTEM INITIAL SERVICE POLICY

Our Company, _____, will operate and maintain the BioRobix Aerobic System located at _____, (legal description only) Permit # _____, for the period of 2 years beginning _____ and ending _____.

This contract will provide for all required inspections, testing and service of your BioRobix Aerobic Treatment System. The policy will include the following:

1. _____ inspections a year/service calls (at least one every _____ months), for a total of _____ over the two year period including inspection, adjustment and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting the control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.
3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.
4. Any additional visits, inspections or sample collections required by specific Municipalities, Water/River Authorities, County Agencies, the TCEQ or any other regulatory agency in your jurisdiction will be covered by this policy.

At the conclusion of the initial service policy, the Service Provider will make available, for purchase on an annual basis, a continuing service policy to cover labor for normal inspection, maintenance and repair. According to state law, all owners of aerobic systems must maintain a factory authorized service provider for the lifetime of the system.

With 48 hours of a request for service (weekends and holidays excluded), your system will be visited by the service provider listed below or their authorized agent. If there are any items which need correction and can not be immediately remedied, the service provider will inform the home owner, in writing, of the conditions and the estimated repair date.

The BioRobix Homeowners Manual must be strictly followed or warranties are subject to invalidation. Pumping of sludge build-up, for reasons other than due to warrantied mechanical failure, are not covered by this policy and will result in additional charges. By signing this form, both installer and Homeowner agree to the terms of this policy. By signing this form, both the installer and the Homeowner agree that the Homeowner has received a copy of the Homeowners Manual and the Installer has made a reasonable effort to explain all pertinent information to the Homeowner.

Enviro-Flo, Inc. is not responsible for service, it is the SERVICE PROVIDER indicated below.

HOME OWNER

SERVICE PROVIDER

Name

Name of Service Company Representative

Address

Address

City

City

(_____) _____ - _____

(_____) _____ - _____

Signature of Home Owner

Signature of Service Provider and License #.