

**24 HOUR  
EMERGENCY  
SERVICE**

**Royal Plus, Inc.**  
**Plumbing • Heating • Air Conditioning**  
**201 Belt Street, Snow Hill, Maryland 21863**  
**410-677-3473 • Fax: 410-632-5441 • www.royalplus.com**



**ANNUAL PREVENTATIVE MAINTENANCE AGREEMENT**

This agreement will provide, twice annually, a qualified technician to check your HVAC equipment for proper operation & efficiency, Monday through Friday 8:00 A.M. to 4:30 P.M. excepts holidays. As part of our maintenance agreement repairs performed Monday through Friday 8:00 A.M. to 4:30 P.M. except holidays will be charged at our normal service rates, less 10% off the total invoice cost. Repairs made after normal business hours, on Saturday, Sunday, and on holidays will be charged at the appropriate over time rates, less 10% off the total invoice cost. Under this agreement, filters if provided by home owner, will be replaced or cleaned as needed during your maintenance check. If filters are needed, RPI will ask prior authorization from member to purchase, install & invoice the member accordingly. Below, you will find the routine checks we perform twice annually.

- Check compressor amperage draw
- Check condenser fan motor & shield
- Check condenser fan blade
- Oil condenser fan motor (as needed)
- Check condenser fan motor amperage draw
- Chemically clean condenser coil
- Check compressor contacts
- Check compressor safety overloads
- Check electric relays and capacitors
- Check refrigerant and suction pressure
- Check evaporator coil
- Check and clean drain trap and line
- Check blower wheel
- Oil blower motor as needed
- Check blower amperage draw
- Check wheel rotation
- Check thermostat operation
- Check electric heating and elements
- Check electrical connections
- Check reversing valve
- Check defrost control and operation
- Check emergency heat switch and operation
- Check outdoor thermostat and operation
- Change and/or clean filter

| Equipment | Make  | Model | Serial No. |
|-----------|-------|-------|------------|
| _____     | _____ | _____ | _____      |
| _____     | _____ | _____ | _____      |
| _____     | _____ | _____ | _____      |
| _____     | _____ | _____ | _____      |
| _____     | _____ | _____ | _____      |
| _____     | _____ | _____ | _____      |

Customer Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Service Address \_\_\_\_\_

Key Location \_\_\_\_\_

This contract covers the period \_\_\_\_\_ to \_\_\_\_\_.

The price for this period is \$ \_\_\_\_\_, payable in advance. Contract pricing will be adjusted annually to reflect current labor costs and warranty status of equipment and compressors.

**Customer Acceptance:**

**Service Agreed To:**

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print

\_\_\_\_\_  
Title