

NON-WARRANTY SERVICE WORK AUTHORIZATION

By initialing **ONE** of the following options and signing below, I authorize Distinct Hot Tub Repair & Service, LLC., to perform repairs to my spa.

- 1) **ESTIMATE ONLY** _____ I authorize DHT Repair to provide as detailed an estimate as possible for the repairs on my spa and I will then make a decision if I'd like to proceed (Your Repair Quote is good for 12 months from date of initial evaluation).
- 2) **PRE-AUTHORIZATION** _____ I authorize DHT Repair to fix my spa up to a maximum dollar amount of _____. Should it be necessary to exceed this present spending limit, I will be notified and contacted for additional authorization.
- 3) **GENERAL AUTHORIZATION** _____ I authorize DHT Repair to fully fix and repair my spa to its full operational functions as when delivered to me new.

A standard NON-WARRANTY service call of 30 minutes or less is \$139.00, plus parts. Our labor rate after the first 30 minutes is \$120.00/per hr., billed in 15-minute increments. Upon payment of \$139.00 (should you need us to return for any reason) you are covered for the cost of all travel & diagnostics for an entire year from the initial service date— all you would be expected to cover is the cost of the part and straight labor to install it.

Payment is due upon completion of the repair; completion of the repair up to the pre-authorized amount; or in the case of an estimate only which entails just the service call fee of \$139.00.

I understand that I may pay for services rendered with Cash, Check or Credit Card. If I choose to pay by cash or check a credit card number must be provided and I must be present when the technician completes the service call to be able pay him directly with cash or check made out to Distinct Hot Tub Repair & Service, LLC.

- By Initialing here _____ I am selecting to call into the office to provide my card number in which they will run the card to pay for the repairs and email me my Receipt & Warranty Information via email.
- By Initialing here _____ I am selecting an electronic Invoice to be sent to the email address I have provided, in which I will pay through the Authorize.net terminal once the repair has been completed—I will then receive my Receipt & Warranty Information via the same email.

Card Number _____ Expiration Date _____ CVV (3-4 Digit Code on Back) _____

Billing Address (if different from service location) _____

If Returning this signed form by email, please call in with the card number—do not email it.

You may return the necessary forms by regular mail, email or by text photo:

Mail to: _____ Email to: service@dhtrepair.com Text photo: 480.238.5836
 Distinct Hot Tub Repair & Service, LLC dhtrepair@icloud.com 480.217.1669
 814 E. Melody Dr.
 Gilbert, Az 85234

X _____ X _____ X _____
 (SIGNATURE) (PRINT NAME) (DATE)

Thank you!