

5023 B.U. Bowman Drive / Buford, GA 30518 / (770)932-9935

Company:		Contact :	
Bill To Address	:	EMAIL :	
City / State:		Preferred Shipping:	OVERNIGHT OR GROUND
Zip:		Fed Ex/UPS Account #: _	
Phone:	_()_	Ship To Address: (SAME	E AS BILLING) Y / N
	_()	Commercial OR Residential	Ship To Address? (circle)
1. Evalu	Agreement  uation Fee: A non-refundable fee detailed evaluation to determine refundable fee detailed evaluation fee detailed evaluation to determine refundable evaluation eval	0 1	1 1
evalu	ation.		
	nate and Approval: Upon complete sent via email. The client may the		
days	<b>trieved Equipment:</b> Equipment n from the date of the estimate will be led without further notice.		
transp	ping and Handling: Clients are reportation expenses. Equipment ship ional handling fee.		_
	nent for Repairs: Payment in full letion of the repair work.	for any approved repairs	is required upon
Acknowled	gment and Agreement		
	below, the undersigned acknowled comply with the terms and condit	•	nderstand this document
Signature:	Name:		Date: