

Pool Closings & Spa Service Order:

NOTE: To insure Pool Closing or Weekly Service Plan, please complete the entire Service order and mail to **Little Giant Pool & Spa** with the deposit(s) indicated.

NAME: _____
 ADDRESS: _____
 _____ ZIP: _____
 PHONE#: _____
 E-MAIL: _____

NOTE: Due to inconveniences that may occur with the weather please keep in mind we cannot guarantee that week.

MY CLOSING DATE: PLEASE PLACE "C" for close in the box provided.

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Week of Aug. 3 rd | <input type="checkbox"/> Week of Sept. 7 th | <input type="checkbox"/> Week of Oct. 5 th | <input type="checkbox"/> Week of Nov. 2 nd |
| <input type="checkbox"/> Week of Aug. 10 th | <input type="checkbox"/> Week of Sept. 14 th | <input type="checkbox"/> Week of Oct. 12 th | <input type="checkbox"/> Week of Nov. 9 th |
| <input type="checkbox"/> Week of Aug. 17 th | <input type="checkbox"/> Week of Sept. 21 st | <input type="checkbox"/> Week of Oct. 19 th | <input type="checkbox"/> Week of Nov. 16 th |
| <input type="checkbox"/> Week of Aug. 24 th | <input type="checkbox"/> Week of Sept. 28 th | <input type="checkbox"/> Week of Oct. 26 th | <input type="checkbox"/> Week of Nov. 23 rd |
| <input type="checkbox"/> Week of Aug. 31 st | | | <input type="checkbox"/> Week of Nov. 30 th |

CLOSING SERVICES: (Check services Desired)

ALL POOLS SHOULD BE CLEANED AND BALANCED BEFORE WE ARRIVE. ALL CUSTOMERS SHOULD LEAVE WINTER PLUGS, COVER, WATERBAGS AND ANY CHEMICALS YOU WOULD LIKE US TO USE BY THE POOL AREA. IF WINTER PLUGS AND CHEMICALS ARE NOT LEFT OUT BY THE POOL. WE WILL INSTALL NEW PLUGS AND USE OUR CHEMICALS WHICH WILL BE BILLABLE TO THE CUSTOMER. MAKE SURE TO LEAVE ALL MATERIAL NEXT TO THE POOL BY MONDAY MORNING OF THE SCHEDULED WEEK OF CLOSING. IF WE ARRIVE FOR A SCHEDULED POOL CLOSING AND THE POOL IS NOT READY OR THE POOL COVER IS NOT LEFT OUT THERE WILL BE AN ADDITIONAL CHARGE \$25.00 FOR US TO RETURN AND FINISH CLOSING POOL.

The standard closing service includes: Testing and balancing, lowering of water, cleaning out filter and pump, blowing intake and outtake water lines and filling with antifreeze, installing winter plugs and placing cover on the pool. All chemicals and antifreeze used will be charged to the customer.

Close my pool at the rate of **\$345.00 plus chemicals** with a 2 hour maximum. I realize that any additional time needed to close my pool will be charged to me at the rate of **\$115.00** per hour. **(Most pools will close within the 2-hour maximum; the pool that requires more time is the pool that is full of debris or is algae infested.)**

Close my spa/fountain/water features (Rate will be quoted.) Pools with attached spas will be charged an additional **\$125.00** for closing. In-Floor systems will be closed at the rate of **\$285.00**.

Deck fountain lines and slide lines will be winterized at the rate of **\$10.00** each. Laminars at a rate of **\$25.00** each. Lagoons at a rate of **\$50.00**.

Circle the style of your pool – **FIBERGLASS - GUNITE - VINYL LINER – DO YOU HAVE TILE? YES OR NO**

Circle the style of cover you have – **AUTOMATIC – ANCHOR – COVER WITH WATERBAGS**

Check box if Little Giant Pool & Spa is storing your pool cover.

Tinart Corporation dba Little Giant Pool & Spa cannot and will not accept financial responsibility for property damage(s) that may occur to the pool or surrounding property(s).

MY POOL USES: CHLORINE BROMINE NATURE 2 IONIZER OTHER: _____

PLEASE QUOTE ME A PRICE ON THE FOLLOWING PRODUCTS, SERVICES AND/OR REPAIRS:

- | | | |
|--|--|--|
| <input type="checkbox"/> Pump | <input type="checkbox"/> Vinyl Liner Replacement | <input type="checkbox"/> Concrete Replacement or Repair |
| <input type="checkbox"/> Filter | <input type="checkbox"/> Leak Detection | <input type="checkbox"/> Seal Deck |
| <input type="checkbox"/> Heater | <input type="checkbox"/> LED Lights | <input type="checkbox"/> Remove and Replace Caulk Joints |
| <input type="checkbox"/> Chlorinator | <input type="checkbox"/> Sand Blast and Paint | <input type="checkbox"/> Anchor Cover |
| <input type="checkbox"/> Salt System | <input type="checkbox"/> Sand Blast and New Plaster | <input type="checkbox"/> Automatic Safety Pool Cover |
| <input type="checkbox"/> Auto Pool Cleaner | <input type="checkbox"/> Sand Blast and Stone Finish | <input type="checkbox"/> Manual Safety Pool Cover |
| <input type="checkbox"/> Repair or Replace Light | <input type="checkbox"/> Repair or Replace Tile | <input type="checkbox"/> Change Sand in Filter |
| <input type="checkbox"/> Automation Systems | <input type="checkbox"/> Repair or Replace Coping | <input type="checkbox"/> Replace Filter Cartridges |

Other _____

I am enclosing my **\$125.00 non-refundable deposit** for my pool closing. **(ALL SALES ARE FINAL)**

MASTER CARD or VISA # _____

EXPIRATION DATE: _____ LAST 3 DIGITS ON SIGNATURE STRIP: _____

120 N. Olive Street
 Pacific, MO 63069



636-271-2200 Office
 636-271-2204 Fax