



Frank & Lindy
Plumbing & Heating Service Co.

The Lindy Building
2 John Walsh Boulevard
Peekskill, NY 10566
Phone: (914) 737-7000
(845) 896-3000
Fax: (914) 737-3408
www.FrankandLindy.com

Comfort KeeperSM Service Partner Plan

Please enroll me now in the Frank & Lindy Comfort Keeper Service Partner Plan. I understand that I can elect more than one plan option from the choices offered below.

Note: All plans include:

- Priority service scheduling
- Annual tune-up and inspection for the covered system(s)
- Annual inspection (for "plumbing only" plan members)
- Plus 5% off all other Frank & Lindy services

Plan Options

Please choose as many plan options as you like. **IMPORTANT:** for each plan option you select, you must also select your preferred payment option, and then enter the appropriate amount in the space provided. If you choose monthly credit card billing, then enter only the amount of your first month's payment.

<input type="checkbox"/>	Plumbing Only...	Enter Amount
	choose one of the following payment options	
Best Value!	<input type="checkbox"/> Monthly (credit card only): \$4.95/month	\$ _____
Or...	<input type="checkbox"/> Annually (credit card or check): \$84.00/year	\$ _____

<input type="checkbox"/>	Heating Only*...	
	choose one of the following payment options	
	*Oil heating plans available only on Energy Kinetics System 2000	
Best Value!	<input type="checkbox"/> Monthly (credit card only): \$12.95/month	\$ _____
Or...	<input type="checkbox"/> Annually (credit card or check): \$179/year	\$ _____

<input type="checkbox"/>	Cooling Only	
Best Value!	<input type="checkbox"/> Monthly (credit card only): \$12.95/month	\$ _____
Or...	<input type="checkbox"/> Annually (credit card or check): \$179/year	\$ _____

<input type="checkbox"/>	Combined Heating & Cooling System	
Best Value!	<input type="checkbox"/> Monthly (credit card only): \$17.95/month	\$ _____
Or...	<input type="checkbox"/> Annually (credit card or check): \$248/year	\$ _____

<input type="checkbox"/>	Additional Heating and/or Cooling Systems	
	<input type="checkbox"/> I would like to include ____ extra heating system(s) and/or ____ extra cooling system(s) (please enter the appropriate number(s) in the spaces provided.)	
Best Value!	<input type="checkbox"/> Monthly (credit card only): \$6.95/month per additional system	\$ _____
Or...	<input type="checkbox"/> Annually (credit card or check): \$96.00/year per additional system	\$ _____

Total of All Plan Options Currently Due	\$ _____
Sales Tax (enter appropriate percentage here: _____%) +	\$ _____
Total Now Due	\$ _____

Name _____

Address _____

City _____ State _____ Zip _____

County _____

Phone (with area code) _____ Date _____

Email _____

If Paying By Credit Card:

Number: _____ Expiration Date: _____

Name as it appears on your card: _____

Your signature: _____

* I hereby authorize Frank & Lindy to charge \$ _____ to my credit card every month for as long as my Comfort Keeper Service Partner Plan is active.

If Paying By Check:

Please make your check payable to:
Frank & Lindy Plumbing & Heating Service Co.

Frank & Lindy Representative