ALL INFORMATION IS REQUIRED FOR SERVICE

Faxes that are missing required information will be returned for completion

*CALLER/POOL COMPANY NAME	
*POOL COMPANY	
TELEPHONE/FAX NUMBER	
*CUSTOMER NAME	
(FIRST AND LAST)	
*ADDRESS	
(PLEASE INCLUDE CITY AND ZIP CODE)	
IS SUBDIVISION GUARDED OR	□ VEC □ NO IF VEC DIFACE INCLUDE CATE CODE
GATED?	☐ YES ☐ NO IF YES PLEASE INCLUDE GATE CODE
*CUSTOMER TELEPHONE	
NUMBERS	
*MANUFACTURER & MODEL	
NUMBER OF EQUIPMENT TO BE	
SERVICED	
TYPE OF GAS (HEATER)	
$\lambda \lambda $	□ PROPANE □ NATURAL (PLEASE CHECK ONE)
*INSTALLATION DATE	
INSTALLER	B 100 0 11.
(MAY LEAVE BLANK IF INSTALLED BY THE POOL CO)	Pool & Spa Specialists
*PROBLEM DESCRIPTION	
If the above requested service call is deemed by the manufacturer to be a non-warranty issue, please bill:	
☐ CUSTOMER ☐ POOL COMPANY	

By checking the customer box, you acknowledge that the customer will be responsible for the billing if the service is deemed by the manufacturer to be a non warranty issue. We will also explain this to the customer before performing the service. If the pool company box is checked, you will be notified if the service is deemed to be a non-warranty issue and all billing will be forwarded to the pool company. Please note: IF ONE OF THE ABOVE BOXES IS NOT CHECKED THE BILLING WILL AUTOMATICALLY BE FORWARDED TO THE POOL CO FOR ALL NON WARRANTY ISSUES. We appreciate your assistance in helping us to expedite this service call for your customer. THANK YOU!



PH (407) 678-1277 FAX (407) 677-6327 OR VISIT US ON THE WEB AT WWW.DALESGAS.COM