



PEST SOLUTIONS

Lic. # 8715

# PEST CONTROL SERVICE AGREEMENT

CUSTOMER

STREET

CITY, STATE, ZIP

PHONE

EMAIL

VISA MASTERCARD DISCOVER AMERICAN EXPRESS

☐☐☐☐

CREDIT CARD #

EXPIRATION

CVV #

EASY PAY PLAN \*

AUTHORIZED SIGNER

## TERMS OF AGREEMENT

**SATISFACTION GUARANTEE:** If any covered pest reoccurs within 30 days after a regular service, SPS will retreat the affected areas at no charge. If you, the Customer, are not completely satisfied after receiving no fewer than two re-treatments, SPS will release you from the service contract without penalty.

**SCHEDULING:** Customer will receive pest control services according to the service schedule selected below. Service day will be dependent on the technician's service route and customer will be notified of the upcoming service date either by phone, email or text. The exterior of the home will be treated at the time of the scheduled service and a service ticket will be left at the home. Interior service is not always necessary, but is available upon request if access is provided at the time of the scheduled exterior service.

**AGREEMENT PERIOD:** I understand that this agreement is for a period of twelve (12) months commencing on the date of the initial service. I understand that regular services will be performed according to the service schedule and I agree to receive and pay for all services as outlined in this agreement. After the initial agreement period, services will continue month-to-month until canceled by Customer, with a signed 30-day-written notice.

## COVERED PESTS INCLUDED

• Ants • Crickets • Centipedes • Earwigs • Millipedes • Pill Bugs • Roaches • Silverfish • Spiders

## SPECIALTY PEST REMEDIATION

ADDITIONAL CHARGES APPLY

• Bees • Fleas / Ticks • Mice / Rats • Bed Bugs • Roach Infestation • Scorpion Infestation • Wasps / Hornets

	SERVICE SCHEDULE	VISITS PER YEAR	PRICE PER VISIT	ANNUAL CONTRACT PRICE
<input type="checkbox"/>	Monthly	12	\$50.00	\$600.00
<input type="checkbox"/>	Every-Other-Month	6	\$65.00	\$390.00
<input type="checkbox"/>	Quarterly	4	\$95.00	\$380.00
<input type="checkbox"/>	On Demand		\$135.00	

## PAYMENT METHOD & SERVICE CHARGES

\* A valid credit card on file is required for all service agreements. Services are invoiced at the beginning of the scheduled service month. Payments are required by the time of service and may be made in advance via credit card, bank bill pay or check. If payment is not received by the service date, the credit card on file will be charged the contracted price per visit. A \$25.00 charge is assessed for each payment that is either declined or returned from a bank regardless of the reason. Past due invoices are subject to a per month service charge of 1.5% or minimum \$1.00, whichever is greater.

Customer Authorization

Date

SPS Representative

Date