

American Mini Splits Inc.
 PO Box 414 • Short Hills, NJ 07078
 Phone (973) 736-0636 • Fax: (877) 623-8435
 Email: Info@AmericanMiniSplits.com

License No.: _____
 Job No.: _____
 Location: _____
 Phone No.: _____

Name: _____ Phone: Res. _____ Bus. _____
 Address: _____ City: _____ State: _____ Zip: _____

I/We, the owners of the premises described below, hereinafter referred to as "Purchaser" offer to contract with American Mini Splits Inc., hereinafter referred to as "AMS," to furnish, deliver, and arrange for installation of all materials necessary to improve the premises located at:

 _____ (Street) _____ (City) _____ (State) _____ (Zip)

INSTALLATION SPECIFICATIONS

RESIDENTIAL COMMERCIAL
 ROOM DIMENSIONS _____ L x _____ W = _____ Sq. Ft. ROOM HEIGHT _____ Ft.
 LOCATION _____
 1ST FLOOR STANDARD 2ND FLOOR \$ _____ OTHER \$ _____
 OUTSIDE WALL CONSTRUCTION _____
 110V 220V
 ELECTRIC AMPS _____ BREAKER OPENINGS _____ PANEL MANUFACTURER _____
 SUB-PANEL REQUIRED \$ _____
 SERVICE UPGRADE _____ AMPS \$ _____
 ROOM ELECT OUTLET _____ VOLTS _____ AMPS _____ # WIRE _____
 _____ Ft. FROM ELECTRICAL PANEL TO CONDENSER
 _____ Ft. REFRIGERATION LINE-SET FROM CONDENSER TO AIR HANDLER
 LINE-SET COVER COLOR _____
 CONDENSATE PUMP \$ _____
 CONDENSER SLAB SIZE _____
 ADDITIONAL CHARGES \$ _____

SYSTEM RATING BTU'S COOLING _____ SEER _____ HEATING _____ AFUE # _____

EQUIPMENT BRAND: _____
EQUIPMENT MODEL #'S: _____
 AIR HANDLER # _____
 CONDENSER UNIT # _____
 LINE-SET INSTALLATION KIT # _____
 T-STAT REMOTE # _____
 OTHER # _____

ACCESSORIES:
 CONDENSER WALL BRACKET

EQUIPMENT SPECIFICATIONS:
 FURNACE/AIR HANDLER NEW
 CONDENSER UNIT NEW
 LINE SET NEW

DRAIN LINES NEW
 CONDENSATE PUMP NEW
 SLAB NEW
 OTHER _____

SPECIAL INSTRUCTIONS:

CONTRACT PRICE	\$ _____
STATE SALES TAX	\$ _____
(IF APPLICABLE)	\$ _____
DOWN PAYMENT	\$ _____
BALANCE DUE	\$ _____
TO BE FINANCED <input type="checkbox"/>	\$ _____

THIS CONTRACT PRICE INCLUDES: PRICE: _____
 ___ YR MASTER PROTECTION AGREEMENT _____

ASBESTOS ABATEMENT:
 THIS CONTRACT ASSUMES NO ASBESTOS WILL BE DISTURBED IN THE PERFORMANCE OF WORK. IF UPON FURTHER INSPECTION BY CONTRACTOR OR OTHERS, ASBESTOS HAS TO BE DISTURBED TO PERFORM WORK, CUSTOMER MUST ARRANGE AND PAY FOR ABATEMENT OF ASBESTOS PRIOR TO THE START OR CONTINUATION OF WORK. IF CUSTOMER FAILS TO ARRANGE FOR NECESSARY ASBESTOS ABATEMENT WITHIN THIRTY (30) DAYS, AMS MAY CANCEL THIS PROPOSAL UPON WRITTEN NOTICE TO CUSTOMER.
 _____ INITIAL
 THE WORK WILL START APPROXIMATELY _____ AND WILL BE SUBSTANTIALLY COMPLETED BY APPROXIMATELY _____. THESE DATES ARE SUBJECT TO CHANGE AT THE TIME THE CONTRACT IS ACCEPTED BY AMS OR AT ANY OTHER TIME BY MUTUAL WRITTEN AGREEMENT. I UNDERSTAND THAT THIS IS ONLY AN ESTIMATE DATE AND I WILL BE CONTACTED PRIOR TO THIS DATE TO SCHEDULE THE ACTUAL INSTALLATION DATE.

CUSTOMER AGREES:
 AMS IS NOT RESPONSIBLE FOR ANY EXISTING CODE VIOLATIONS OR PRE-EXISTING CONDITIONS OF ANY DUCTWORK, PIPING, ELECTRICAL SUPPLIES OR EQUIPMENT NOT BEING REPLACED AT THIS TIME. IF ADDITIONAL WORK IS REQUIRED, IT WILL BE THE CUSTOMER'S RESPONSIBILITY. ANY ADDITIONAL CHARGES WILL BE QUOTED AND APPROVED PRIOR TO THE START OF ADDITIONAL WORK.
 _____ INITIAL
 AMS RESERVES THE RIGHT TO SUBSTITUTE A PRODUCTS OF EQUAL OR GREATER EFFICIENCY AND/OR VALUE FOR YOUR ORIGINALLY PURCHASED PRODUCT AT NO ADDITIONAL CHARGE TO YOU.
 _____ INITIAL

SUBMITTED BY _____ No. _____ (ADDITIONAL PROMSIONS OF THIS PROPOSAL ON REVERSE SIDE.)

 (CUSTOMER SIGNATURE) (CUSTOMER SIGNATURE) (DATE OF THIS TRANSACTION)