

# CMI SERVICE WORK

CUSTOMER: \_\_\_\_\_

Phone Number: \_\_\_\_\_

ORIGINAL INVOICE #: \_\_\_\_\_

Date Received : \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Symptoms : \_\_\_\_\_

Problem Found: \_\_\_\_\_

Parts needing replaced: \_\_\_\_\_

\_\_\_\_\_

Technician : \_\_\_\_\_

Date Completed: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

\*\*\*\*\* Notice \*\*\*\*\*

Minimum \$49.00 charge for all service work performed.

Rate: \$49.00 per. Hour. Non-Prorated.

Once notified, item (s) left over 30 days, will be sold to collect charges applied to any work performed or parts installed in systems.

Customer Agrees to terms listed above. \_\_\_\_\_

Customer **must sign** to have work performed.