



MID-COAST ENERGY SYSTEMS, INC.
P.O. BOX 1118
33 MIDCOAST ROAD
DAMARISCOTTA, MAINE 04543
TEL 207.563.5147 ~ FAX 207.563.1138
www.midcoastenergysystems.com



THE DEFENDER
L.P. & NAT. GAS

A Mid-Coast Energy Systems Annual Preventative Maintenance Agreement for Propane Heating Systems and Water Heaters.

Let us take the worry out of servicing your heating system equipment.
 Have peace of mind knowing that we are keeping yours running at its peak efficiency.

Maintenance Checklist:

- | | |
|---|-------------------------------------|
| 1. Complete vacuum of sections (Ducts not included) | 6. Check gas valve & pressure |
| 2. Clean and calibrate electrodes | 7. Inspect / Clean Condensate Drain |
| 3. Inspect and clean heat exchanger | 8. Replace air filter |
| 4. Clean and adjust burner & ignition controls | 9. Check fuel connections for leaks |
| 5. Clean and check breeching | |

- ★ **24 Hour Emergency Service at Regular Rates**
- ★ **10% Discount on all Heating System Repair Parts During the Plan Year**
- ★ **Priority Dispatch for Heating System Repair Call**

ANNUAL COST: \$229.00

***Price includes travel time up to 30 minutes or less door to door. For further distances please inquire about pricing.**

*Mid-Coast reserves the right to reject any service agreement if an inspection by our service technician finds the equipment to be in such condition that service will be unsatisfactory to both parties. Some existing systems may require code updates to satisfy State of Maine and NFPA requirements.

**Mid-Coast will endeavor to render prompt and efficient service hereunder, but it is expressly agreed that Mid-Coast shall in no event be liable for damage or loss caused by delay or any loss arising out of performance of this agreement.



 ACCEPTANCE OF DEFENDER CONTRACT – By signing below you agree that the above prices, specifications and conditions are satisfactory and are hereby accepted. Mid-Coast Energy is authorized to do the work as specified. Payment must be made in advance. Upon receipt of payment the Service Manager will call you to schedule the appointment.

Printed Name: _____

Signature: _____ Date of Acceptance: _____

Phone: _____ Email: _____

Check One: check enclosed Mastercard/Visa _____ exp _____ / _____