



# PEACE OF MIND MEMBERSHIP ENROLLMENT FORM

First Name, Last Name  
Street Address  
City, State, ZIP

**Hello!** We have updated our maintenance agreement. If you previously made a single or annual payment, you will need to enroll in the new **Peace of Mind Membership**.

**Questions?** Please call 484-470-1985 during business hours or visit [OliverHeatCool.com](http://OliverHeatCool.com).

**Service Location:** Street, City, State, Zip

Select a membership plan(s) for annual safety inspection(s). Indicate the number of systems in your home.

**A**  
**Air Conditioner System**  
**\$13 per month**  
\_\_\_\_\_ System(s) x  
\$13 each = \$\_\_\_\_\_

**B**  
**Gas Heating System**  
**\$13 per month**  
\_\_\_\_\_ System(s) x  
\$13 each = \$\_\_\_\_\_

**C1** Heat Pump\*,  
Geothermal or  
Ductless System  
**\$26 per month**  
\_\_\_\_\_ System(s) x  
\$26 each = \$\_\_\_\_\_

**C2** Additional  
Ductless Split System  
Indoor Unit  
**\$13 per month**  
\_\_\_\_\_ System(s) x  
\$13 each = \$\_\_\_\_\_

\*2 inspections per year

**Total for all systems per month \$\_\_\_\_\_**

Payments will be automatically withdrawn on the same date each month. If membership is canceled within 12 months, the customer is responsible for any and all services provided.

Visit [Oliverheatcool.com](http://Oliverheatcool.com) to see all **Peace of Mind Membership** Terms and Conditions.

**Customer Care:** Phone: 484-470-1985 • Email: [rsvc@oliverhvac.com](mailto:rsvc@oliverhvac.com)

**Detach here and return the bottom portion in the envelope provided or call Customer Care to enroll over the phone.**

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**Check your choices and write in the number of systems:**

**A** \_\_\_\_\_  **B** \_\_\_\_\_  **C1** \_\_\_\_\_  **C2** \_\_\_\_\_

**Select one of these payment options and fill in all required information.**

**CHECKING ACCOUNT**

Name on Checking Account: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Checking Account Number: \_\_\_\_\_

**CREDIT CARD** (We accept Discover, Visa, MasterCard, American Express)

Card Number: \_\_\_\_\_

CVV: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_



Oliver Heating & Cooling  
101 Waverly Avenue  
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