

Kings.pool.spa@gmail.com
2020 Beaver Avenue,
Monaca, Pa 15061
P: 724-728-8888
F: 724-728-5464



Name: _____

Home Address: _____

City/State _____

If the billing address is different than home address, please contact the store.

Phone _____ Preferred Number belongs to _____

_____ Optional Number belongs to _____

Pool Closing 2025

- What Chemical is used in your pool?
___ Chlorine ___ Baquacil ___ Pristine Blue ___ Salt
- Would you like shock and algaecide added to your pool at closing for an additional cost?
___ Yes ___ No
- What type of filter do you have?
___ Sand ___ Diatomaceous Earth ___ Cartridge

Please choose one:

- Cart/Earth Filter taken to business location for soak and returned upon completion
___ Yes ___ No

Additional \$10 cartridge filter charges for each filter

- Make repairs to filter as Needed
___ Yes ___ No
- Must choose a Payment Method to be scheduled
___ Payment in advance
___ Credit card on file
(Attached sheet must be filled out & returned)

WE DO NOT SERVICE BLOW UP OR QUICK SET POOLS OR SPA

What type of service would you like scheduled?

All prices are subject to 6% sales tax

Choose one:

- **Full Closing**
Small Closing (0-499sqft) \$260 Medium Closing (500-800sqft) \$290 Large Closing (801+sqft) \$310
- **Install cover only** (based on time there \$155 minimum charge.)
- **Blow out and Winterize equipment** (Based on time we are there, \$155 minimum charge plus cost of antifreeze)
- **Close Spa** (connected to pool) and will be added to closing rates \$110+ anti-freeze.

By signing the line below, I agree that I have read and understand the pool opening and closing cover page and I am authoring King's Pool & Spa Inc. To serve my pool and/or spa. **I understand that I will need a credit card on file or pay for services requested in advance.** If equipment, materials, electricity, or water is not available for the service team to perform their duties a 2nd service fee of \$50.00 will be assessed and needs to be paid before return visit. All equipment will be left poolside. Less than a 72-hour notice will incur a \$50 cancellation fee.

Sign & Date _____

Circle and number the order of choices.

August 4-8

August 11-15

August 18-22

August 25-29

Closed Labor Day September 1

September 2-5

September 8-12

September 15-19

September 22-26

Sept 29-October 3

October 6-10

October 13-17

October 20-24

October 27-31

Week not mentioned. _____

Office Use Only:

#

THIS SIDE IS FOR STORE USE ONLY!

Crew # _____ Day of week: _____ Date: _____ Employees: _____

Start Time: _____ End Time: _____

Pool Size: 0-499 500-800 801+
Filter Soak? Yes No Cartridge FNS # _____ EC# _____ Star# _____
Pool Condition: Clean Dirty Stains Comments:
Install Cover? Yes No
Cover Type: Foxx Safety Tarp Automatic Condition of Cover? Poor Fair Good New Comments:
Disconnect Equipment Timer? Yes or No
Accessories Removed? Handrails Ladder Solar Cover Solar Reel Backwash Line
Blow Out Lines? Yes No
Extra Blow Outs? Waterfall Deck Jets Solar Panel Slide Bubbler Heat Pump
Plugs Installed? Skimmer Returns Buddy Seat Low Suction Stair Jets Sweep Deck Jets
Drain Plugs Removed? Pump Filter Heater Chlorinator Salt Cell Off line chlorinator UV
Chemicals Added? Shock Algaecide
Spa Closing? Yes No Connected to pool Separate Unit Comments:
Total Charges To Bill Customer: ___ Full closing ___ sm(\$260) ___ med(\$290) ___ lg(\$310) ___ Install cover only (\$155) ___ Blowout and winterize equipment only(\$155) ___ Spa closing (attached)(\$110) ___ Salt cell cleaning (\$50)
Billed By: _____ Date Billed: _____