



Lighting Maintenance Program  
Terms and Agreement

**LIFE OF AGREEMENT:** This agreement begins upon approval by Customer and payment of first month Program Fees and continues for a period of twenty four (24) months. Customer, at time of Program approval and acceptance states that customer has no intention of sale or transfer of ownership of facility during life of agreement. Should such sale or transfer occur during life of agreement Customer agrees to “buy out” agreement at the rate of \$100.00 per month of remaining life of agreement. This agreement is transferrable to subsequent owners at then current rates and upon approval of this agreement by the new owner and AEC. If transfer is accepted customer will not be responsible for any “buy out” fees.

**INITIAL VISIT:** Arco Electric Company (AEC) will visit customer’s facility after payment of first months fees and make all repairs necessary to covered lighting. Customer will be responsible for material costs only. Material costs will be added to following months Program billing. Customer may choose at this time to have all lighting lenses cleaned and agrees to pay labor charges for cleaning. Initial repairs do not include wiring, fixture or lens replacements.

**MONTHLY VISITS:** AEC will schedule a monthly visit to customers facility and make repairs to all covered lighting as necessary. Monthly visit will not be affected because of unscheduled visits.

**UNSCHEDULED VISITS:** AEC will respond to additional calls for service as necessary. Response times will be: Standard lighting (3 or more canopy lamps out, price or reader board out, 4 or more building eve lights out, 3 or more area lights out) within three (3) regular business days, ID signs (completely or partially out) on following regular business day. AEC will consider calls for service with fewer than stated minimum outages to be nuisance calls and the Customer agrees to be responsible for labor charges. Any additional labor charges will be added to following months billing.

**REGULAR BUSINESS DAYS, HOURS:** AEC regular business hours are 7:00 AM through 3:30PM, Monday through Friday excluding holidays.

**WEEKEND, HOLIDAY, AFTER HOURS SERVICE:** Customer may request service on weekends, holidays and after hours through AEC’s 24 hour phone service. Customer agrees to be responsible for all labor charges for weekend, holiday and after hours service. Labor charges will be added to following months billing. After hours and Saturday labor will be billed at time and one half of our regular service labor rate. Sunday and Holiday labor will be billed at double time.

**CANCELLATION:** This agreement may be cancelled by AEC at any time after one (1) year with 30 days notice. Customer may cancel after 24 month commitment has been met, with 90 days notice.

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**PAYMENT:** Program fees are payable monthly, in advance. Monthly fees will be paid through Direct Debit of Customers bank account, or automatically processed through Customers Credit Card. Credit Card payments will be assessed a 3% service charge. Customer agrees to be responsible for all costs and fees, including legal fees AEC incurs to collect monies owed to AEC by Customer.

**SOLE SUPPLIER OF MAINTENANCE SERVICES:** Customer agrees that AEC shall be the sole supplier of maintenance services on covered lighting. Customer shall not attempt lighting repairs which may cause damage to other covered lighting.

**ADDITION OF LIGHTING:** Customer agrees that any additional installation of lighting not provided and installed by AEC will not be covered by this Program until the warranty period (1 year) of said installation has expired. Additional lighting may then be added to the Program at additional cost if it exceeds the Program base rate coverage.

**WHAT THIS PROGRAM COVERS:**

**Base Rate Coverage includes:**

ID sign (1) up to 32' in height and accessible to our trucks  
Canopy lights (up to 8)  
Area lights (up to 4 fixtures)  
Low Level Lights (up to 6)  
Price Signs (up to 2, including number track, NO NUMBERS)  
Reader Board (1, including letter track, NO LETTERS)  
Wall Packs/Security Lights (all)  
Fluorescent Lights on building (all)  
Circuit Breakers for exterior lighting

**What this Program does not cover:\***

Conduits or wiring  
Fixture replacement  
Fixture cleaning  
Broken lens's  
Damage to lighting caused by wind, water, weather, accident or vandalism  
Neon tubing or ballasts  
Sign faces  
Any sign over 32' in height or signs that cannot be reached by our truck due to placement or landscape  
LED lighting of any type  
Lighting controls including photocells, time clocks, relays, contactors and their associated wiring.  
Interior lighting, unless chosen as an option  
Exit, Emergency lighting circuit boards or batteries  
Backlit fascia, unless chosen as an option  
Repair of pre-existing code violations

Any non-covered repairs or services requested by Customer will be billed at our normal service labor rates plus material.

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## Pricing Information

BASE PRICE		\$145.00		
Total Number of Canopy Lights		$\frac{\quad -20 = \quad}{\quad} \times \$1.50$	\$	\$1.50 each additional
Total Number of ID Signs		$\frac{\quad -2 = \quad}{\quad} \times \$10.00$	\$	\$10.00 each additional
Total Number of Price Signs		$\frac{\quad -2 = \quad}{\quad} \times \$6.00$	\$	\$6.00 each additional
Total Number of Reader Boards		$\frac{\quad -1 = \quad}{\quad} \times \$4.00$	\$	\$4.00 each additional
Total Number of Area Light <u>Fixtures</u>		$\frac{\quad -6 = \quad}{\quad} \times \$1.50$	\$	\$1.50 each additional
Total Number of Low Level Lights		$\frac{\quad -6 = \quad}{\quad} \times \$1.00$	\$	\$1.00 each additional
Backlit Fascia (optional) (building or canopy) # of sides		$\quad \times \$18.00$	\$	\$18.00 each side
Interior Store Lighting (optional) (up to 3500 sq. ft.)		<b>NO \$0.00</b> <b>YES \$35.00</b>	\$	\$35.00 up to 3500 square feet
<b>TOTAL PROGRAM MONTHLY FEE</b>		<b>\$</b>		

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## LABOR RATES

Labor rates for all non-covered repairs, and after hours, weekend and holiday service;

Regular Rate (regular business hours)	\$85.00 per hour
Time plus one half (after hours, Saturday)	\$127.50
Double Time (Sunday, holidays)	\$170.00

## PROPERTY INFORMATION

<b>Contact/Owner</b>					
<b>Name of Business</b>					
<b>Address</b>					
<b>City</b>		<b>State</b>		<b>ZIP</b>	
<b>Phone</b>					
<b>Cell Phone</b>					
<b>E-Mail Address</b>					

## PAYMENT INFORMATION/OPTIONS

### Direct Debit-EFT Authorization

<b>Bank Account Holder</b>					
<b>Name of Applicant/Owner</b> <small>(if other than account holder)</small>					
<b>Name of Financial Institution or Bank</b>					
<b>Account Number</b>					
<b>Routing Number</b>					
<b>Address</b>					
<b>City</b>		<b>State</b>		<b>ZIP</b>	
<b>Signature of Account Holder:</b>					
<b>Type of Account (choose1)</b>	<b>Checking*</b>		<b>Savings</b>		
<b>Effective Date</b>	/	/			

\*Please submit a void check with this form.

## Credit Card

<b>Name on Card</b>				
<b>Billing (card) Address</b>				
<b>City</b>		<b>State</b>		<b>ZIP</b>
<b>Card Type</b>				
<b>Card Number</b>				
<b>Expiration Date</b>	/	/	<b>Card Security Code</b>	
<b>Signature of Cardholder</b>				

## ACCEPTANCE

**I HAVE READ THIS DOCUMENT CAREFULLY AND AGREE, IN ENTIRETY,  
WITH ITS TERMS.**

**Print Name** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_