



Ease Comfort

2730 Rowland Rd
Raleigh, NC 27615

Name _____ Phone _____
 Address _____ Date _____ Install Date _____
 City, State _____ Zip: _____ Email _____

#1 Brand _____ Size _____	#2 Brand _____ Size _____
System Type _____ Location _____	System Type _____ Location _____
Outdoor/Pkg# _____	Outdoor/Pkg# _____
Furnace/AHU# _____	Furnace/AHU# _____
Coil/Elec Htr# _____	Coil/Elec Htr# _____
Thermostat: _____	Thermostat: _____
SEER /AHRI _____ / _____ AFUE/HSPF _____	SEER /AHRI _____ / _____ AFUE/HSPF _____

Proposal includes: Removal and disposal of existing equipment. Installation labor, material, equipment, required permits, clean up work area. System start up per manufactures specifications.

- | | | | |
|------------------------------------|------------------------|---------------------------|-------------------------------------|
| Mechanical Permit | Electrical Permit | Outdoor pad /unit support | CO Detector |
| Existing lines & flush | New Refrigerant Lines | Line Hide | Secondary Drain Pan & Safety Switch |
| 120v/240v Circuit | Disconnect Box | Flue Pipe & Gas Pipe | Pick up Loaner 4 Sided Hood |
| Ductwork & Alterations: | Transition to existing | Replace Supply Plenum | Replace Return Plenum |

Replace Supply Ducts: _____ Replace Return Ducts: _____

QTY	Additional Installation Items	Price

Maintenance Agreement: _____ visit _____ Number of System(s): _____

***Labor warranty beyond 1st year requires an active maintenance agreement** Acknowledged: _____

Warranty	Year Labor*	Year Parts	Year Compressor & Coils	Year Heat Exchanger

Humidifier _____	Media Filter _____	APCO Purifier _____	Other _____
Duct Sealing _____	Ultra Violet Light _____	PureAir System _____	Other _____

Rebates: Duke: _____ Dominion: _____ Manufacturer: _____ Other: _____

Payment: Check _____ Credit Card _____ Cash _____ Installation and Equipment: _____
 Financing With Approved Credit: _____ Additional Items: _____
 Program: _____ Discounts: _____

You Pay: _____

Duke Energy Progress Account _____ Total Rebates: _____
 Name on Account _____ Net Price after Rebates: _____

Ease Comfort

Invoice #: _____ Total Balance Due at Completion: _____

Customer Approval: _____ Company Approval: *[Signature]*

Special offer: Free one year Maintenance with any referral of a new system purchased.



E-589CI Affidavit of Capital Improvement

Form E-589CI, Affidavit of Capital Improvement, is generally required to substantiate that a contract, or a portion of work to be performed to fulfill a contract, is to be taxed for sales and use tax purposes as a real property contract with respect to a capital improvement to real property.

- This affidavit may not be used to purchase building materials, other tangible personal property, or digital property to fulfill a real property contract exempt from sales and use tax.
- A person who willfully attempts, or a person who aids or abets a person to attempt in any manner, to evade or defeat a tax imposed by the Sales and Use Tax Laws, or the payment thereof, shall be guilty of a Class H felony. If there is a deficiency or delinquency in payment of any tax due to fraud with intent to evade the tax, there shall be assessed a penalty equal to 50% of the total deficiency.

Section I. Single Use (Complete this section to issue the affidavit for single capital improvement)

A			B <i>Hired to perform capital improvement</i>		
Owner, Tenant, or Real Property Contractor			Real Property Contractor (General Contractor or Subcontractor)		
			AIR EXPERTS, INC		
Address			Address		
			2730 ROWLAND ROAD		
City	State	Zip Code	City	State	Zip Code
	NC		RALEIGH	NC	27615

Describe capital improvement to be performed:

Project Name

Project Address (where the work is to be performed)

City

State

Zip Code

		NC	
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I certify that, to the best of my knowledge, this affidavit is accurate and complete and that the transaction described to be performed by the Real Property Contractor (General Contractor or Subcontractor identified in Box "B") shall be treated as a real property contract with respect to a capital improvement to real property for sales and use tax purposes



Signature of Authorized Person _____

Title _____

Date: _____

Section II. Blanket Use (Complete this section to execute a blanket affidavit).

C			D <i>Hired to perform capital improvement</i>		
Real Property Contractor			Real Property Contractor or Subcontractor		
Address			Address		
City			City		
State			State		
Zip Code			Zip Code		

To be completed by the Real Property Contractor identified in Box C.

I certify that I am a Real Property Contractor who performs capital improvements to real property and all transactions with the real property contractor (subcontractor) identified in box "D" shall be treated as real property contracts with respect to capital improvements for real property for sales and use tax purposes

Signature of Authorized Person _____

Title _____

Date: _____