

Date Received: _____
 Employee: _____
 PHONE FAX
 STORE WEBSITE

ABOVE GROUND POOL OPENING CONTRACT 2026

DEFIANCE WATER RECREATION
 1495 RALSTON AVE
 DEFIANCE, OHIO 43512
 PHONE: 419-782-2618
 FAX: 419-782-0917

PLEASE CHOOSE A WEEK: *Indicate 1 st Choice: _____ 2 nd Choice: _____	<u>CHECK ALL THAT APPLY:</u>
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<input type="checkbox"/>	*Denotes shortened Holiday weeks. **Specific arrival times will not be given!	<input type="checkbox"/>	Basic Pool Opening: Reassemble pump, filter, heater, ladder, & remove cover	\$229
<input type="checkbox"/>	Week 1	March 23 – 27	<input type="checkbox"/> Pump Water Off Solid Cover & Remove Excess Debris; This service is charged by the hour!	\$89 Per Hour
<input type="checkbox"/>	Week 2	March 30 – April 3	<input type="checkbox"/> Remove, Clean & Fold Foxx Solid Cover: Cover will be sprayed off.	\$199
<input type="checkbox"/>	Week 3	April 6 – 10	<input type="checkbox"/> Water Bags: Drain & fold or Remove concrete blocks & weights	\$75
<input type="checkbox"/>	Week 4	*April 13 – 16*	<input type="checkbox"/> Sand Change with Opening: Removal of Dry sand only	\$115
<input type="checkbox"/>	Week 5	April 20 -- 24	<input type="checkbox"/> Sand: 50 lb. bag @ \$21.99 Per Bag	\$
<input type="checkbox"/>	Week 6	April 27 – May 1	<input type="checkbox"/> UV Hookup / Ozone Joe	\$19
<input type="checkbox"/>	Week 7	May 4 -- 8	<input type="checkbox"/> Shop Supplies: Misc. Items used on job \$4.99	\$4.99
<input type="checkbox"/>	Week 8	May 11 -- 15		
<input type="checkbox"/>	Week 9	May 18 – 22		
<input type="checkbox"/>	Week 10	*May 26 -- 29*		
<input type="checkbox"/>	Week 11	June 1 -- 5	SUBTOTAL BEFORE TAXES:	\$
<input type="checkbox"/>	Week 12	June 8 -- 12	All services rendered are taxable; Please add your local, state, and county tax to the total.	TAX TOTAL: \$
<input type="checkbox"/>	Week 13	June 15 -- 19		
TOTAL AMOUNT DUE:				\$

****PAYMENT REQUIRED WITHIN 10 DAYS OF JOB COMPLETION OR CARD WILL BE CHARGED!**

\$50.00 non-sufficient check fee. Please note, specific times of arrival can't be given.

Any Extra Parts will be added to this price and billed to credit card. Additional repairs will be scheduled for a later date. Additional fees will apply.

NOTES:

* For New Customer that purchased home with a pool; Please list previous owner's name also. *

PAYMENT TYPE: <input type="checkbox"/> CHECK ENCLOSED <input type="checkbox"/> CASH	NAME:
<input type="checkbox"/> CREDIT CARD # Required to schedule 3% charge _____	ADDRESS:

EXPIRATION DATE:	CITY/ STATE/ ZIP:
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3-DIGIT V-CODE:	HOME / CELL PHONE:
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SIGNATURE:	WORK PHONE:
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	EMAIL:
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