INSTALLATION AND DELIVERY TRACKING FORM

PO Box 6552 Lake Charles, LA 70606
(888) 878-HOOT (4668) Phone
(337) 478-7592 Fax

THIS SPACE TO BE COMPLETED BY AUTHORIZED DRIVER OR HOOT REPRESENTATIVE

HOOT Model#_____ Blower/Panel Serial#_____ HOOT Mold# ____-____-____-____

Is the System : _____DRIP _____Remote Mounted _____Liquid CL _____Auto Dialer

I have unloaded and placed the HOOT Aerobic Treatment System into the hole provided by the installer. I have checked and confirmed that the system is level (plus or minus one inch from center of tank) and provided all custom parts and components required for a proper installation.

Signature of HOOT Authorized Driver/Representative	Date	Delivery Yard

INSTALLER INFORMATION

Name of Installer Company

Address

City

Phone

HOMEOWNER INFORMATION

Name

Address

City County Req.

Phone

INSTALLER MUST Fill IN OR INITIAL ALL SPACES BELOW

HOOT Driver Arrival Time ___:___ HOOT Driver Departure Time ___:___

I have an engineered plan for this site _____ Permit # and Agency _____

I agree to all local service policies _____ I will send in the service policy _____

USE THIS SPACE TO DRAW A SITE MAP AND DIRECTIONS TO SITE

BY SIGNING BELOW I AGREE THAT I AM RESPONSIBLE FOR THE FOLLOWING:

I UNDERSTAND THAT NO WARRANTY WILL BE EFFECTIVE ON THE SYSTEM UNTIL HOOT SYSTEMS LLC, HAS RECEIVED A COPY OF THIS FORM AND A COMPLETED AND SIGNED COPY OF THE INITIAL HOOT TREATMENT SYSTEM SERVICE POLICY. I UNDERSTAND THAT STATE LAW REQUIRES THAT AN INITIAL TWO YEAR SERVICE POLICY BE PROVIDED IN THE PURCHASE PRICE OF THE UNIT. I WILL CHECK WITH COUNTY/TNRCC/OR OTHER APPLICABLE REGULATORY OFFICIALS PRIOR TO INSTALLATION TO FIND OUT ANY SPECIAL SAMPLING OR SERVICE REQUIREMENTS WITHIN THE INSTALLATION AREA.

I AGREE TO INSTALL THE HOOT SYSTEM ACCORDING TO THE DIRECTIONS WHICH APPEAR IN THE MOST CURRENT VERSION OF THE HOOT INSTALLERS MANUAL. I AGREE AND UNDERSTAND THAT FAILURE TO FOLLOW THE INSTRCTIONS OUTLINED IN THE HOOT INSTALLERS MANUAL COULD RESULT IN THE MALFUNCTION OF THE HOOT AEROBIC TREATMENT SYSTEM, WHICH COULD RESULT IN HARM OR DEATH TO HUMAN OR OTHER LIFE. I AGREE THAT ANY MODIFICATIONS OR SUBSTITUTIONS TO THE HOOT AEROBIC SYSTEM MAY RESULT IN MALFUNCTION, WHICH COULD RESULT IN HARM OR DEATH TO HUMAN OR OTHER LIFE.

Signature of Installer/Company Representative	Installer Number	Date of Delivery/Installation

White Copy - MANUFACTURER Copy Yellow Copy - INSTALLER Copy Pink Copy - HOOT Copy

HOOT TREATMENT SYSTEM INITIAL SERVICE POLICY

HOOT SYSTEMS, LLC

PO Box 6552 Lake Charles, LA 70606

(888) 878-HOOT (4668) Phone

(337) 478-7592 Fax

Our Company, _____, will operate and maintain the Hoot Systems, LLC located at _____(legal description only) Permit# _____, for the period of 2 years beginning _____ and ending _____.

This contract will provide for all required inspections, testing and service of your HOOT Aerobic Treatment System. The policy will include the following:

1. _____ inspections a year/service calls (at least one every _____ months), for a total of _____ over the two-year period including inspection, adjustment, and servicing of the mechanical, electrical, and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly.

2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.

3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.

4. The Homeowner is responsible for maintaining a chlorine residual of at least 1 mg/L in the treatment system. This can be accomplished by using chlorine tablets designed for wastewater use, NOT SWIMMING POOL TABLETS. Upon visit, if the system needs chlorine tablets the service provider will add them and charge the customer. If the customer fails in their responsibility to add the chlorine tablets, they are in violation of law and appropriate action will be taken.

   Initials of Installer_____ Initials of Homeowner _____

5. Any additional visits, inspections or sample collections required by specific Municipalities, Water/River Authorities, County Agencies, the TNRCC or any other regulatory agency in your jurisdiction will be covered by this policy.

At the conclusion of the initial service policy, the Service Provider will make available, for purchase on an annual basis, a continuing service policy to cover labor for normal inspection, maintenance, and repair. According to state law, all owners of aerobic systems must maintain a factory authorized service provider for the lifetime of the system.

The HOOT Homeowners Manual must be strictly followed, or warranties are subject to invalidation. Pumping of sludge build-up, for reasons other than due to warrantied mechanical failure, are not covered by this policy and will result in additional charges. By signing this form, both Installer and Homeowner agree to the terms of this policy. By signing this form, both the Installer and the Homeowner agree that the Homeowner has received a copy of the Homeowners Manual and the Installer has made a reasonable effort to explain all pertinent information to the Homeowner.

HOOT is not responsible for service; it is the **SERVICE PROVIDER** indicated below.

HOMEOWNER	SERVICE PROVIDER
Name	Name of Service Company Representative
Address	Address
City	City
Phone	Phone
Signature of Homeowners	Signature of Service Provider and License #.

THIS BOX MUST BE COMPLETED BY THE SERVICE PROVIDER

HOOT Model#_____ Blower/Panel Serial #_____ HOOT Mold #___-___-___-___

White Copy - Homeowner Yellow Copy – Installer Pink Copy – HOOT Goldenrod Copy - Regulatory Agency

LA- HOOT LIMITED WARRANTY AND REGISTRATION

HOOT SYSTEMS, LLC

PO Box 6552 Lake Charles, LA 70606
888-878-4688 Phone 337-478-7592 Fax

HOOT LIMITED WARRANTY: Hoot Systems, LLC ("HOOT") warrants faulty workmanship or construction of the HOOT treatment system for two (2) years from the date of purchase, subject to the following condition: If HOOT determines that the fault in workmanship or construction of the HOOT treatment system is not the result of improper installation, improper maintenance, failure to service, natural disaster, an act of God (including but not limited to flood, lightning or fire ants), or tampering by any means, then, at HOOT's discretion, HOOT has the right to provide a replacement for such faulty component. The faulty component will be replaced with a rebuilt or new component to the Service Provider for the first two (2) years from the date of purchase. During the initial 2 year service policy, the component will be replaced at no charge. The cost of pumping or cleaning of any component or compartment of the sewage treatment system, which becomes necessary for causes other than malfunction of the equipment, is the responsibility of the Homeowner.

DISCLAIMER

NO GENERAL WARRANTY: Hoot Systems, LLC disclaims any and all warranties, except as indicated above, either express or implied, and expressly disclaims the implied warranties of merchantability and fitness for a particular purpose.

WAIVER OF CONSUMER RIGHTS: In exchange for this warranty, I waive my rights under the Deceptive Trade Practices-Consumer Protection Act, Section 17.41 et seq., Business & Commerce Code, a law that gives consumers special rights and protections. After opportunity for consultation with an attorney of my own selection, I voluntarily consent to this waiver. Homeowner Initials _____

SOLE REMEDY

HOOT's liability for any accident, injury, or damage to any person or property shall be limited to the purchase price of the HOOT Aerobic Treatment System. HOOT is not and shall not be liable for any incidental or consequential damages or injury, regardless of fault, to any person or property resulting from misdesign or mismanufacture of the HOOT Aerobic Treatment System, failure to warn, failure to label, or inadequate instructions in the manual. This clause is effective to the full extent allowed by law and shall be void where prohibited.

WARRANTY REGISTRATION

FOR THE ABOVE WARRANTY TO BE EFFECTIVE, THE HOMEOWNER AND ANY USER ATTEMPTING TO CLAIM ANY RIGHT UNDER THIS WARRANTY MUST COMPLETE THIS FORM AND RETURN A SIGNED COPY TO HOOT WITHIN THIRTY (30) DAYS FROM THE DATE OF INSTALLATION.

By signing this agreement, the Homeowner agrees to all terms contained herein.

HOMEOWNER

_____
Name (Please Print)

_____
Physical Address

_____
City State Zip Code

(_____) _____-_____
Phone

_____
Signature of Homeowner

SYSTEM INFORMATION

_____
Model Number

_____
Serial Number

_____
Service Provider Name

_____
Date of Installation

The Above information can be found on the top of the Control Panel to your system.

White Copy - Homeowner Yellow Copy - Installer Pink Copy - HOOT