



**"The warranty will be valid only after this form is submitted by a licensed HVAC contractor who performed the installation."**

Distributor

Contractor Email Address

Contractor

AHRI# (Optional)

P.O #

Equipment Owner

Phone Number

Installation Street Address

Street Address 2

City

Province

Postal Code

**Equipment Installation Date**

**Agreement Charge**

**ESP Order Code\***

(mm/dd/yyyy)

(Amount paid for ESP by the consumer)  
If left blank the amount of \$0.00 will  
appear on customer agreement,

**Six (6) digit alphanumeric code provided in  
quote page**

## **List Equipment being covered by ESP**

To enter a ductless heat pump/mini-split, begin with the exterior unit followed by the interior units (1st, 2nd, 3rd, 4th zone). Use only one Order Form per Order Code. We recommend completing this form on your computer. If you have printed the form and are filling in the fields by hand, ensure all required grey fields are clearly and legibly completed to avoid processing delays.

Equipment type

Manufacturer

Model

Serial #

Equipment type (int. unit)

Manufacturer

Model

Serial #

Equipment type (int. unit)

Manufacturer

Model

Serial #

Equipment type (int. unit)

Manufacturer

Model

Serial #

Equipment type (int. unit)

Manufacturer

Model

Serial #