

Company Name:	Year Company Established:
Website:	Company Phone:
Primary Contact Name:	Google/BBB Rating:
Primary Contact Phone:	
Primary Contact Email:	
Address:	
City: State	:Zip:
<u>Cc</u>	ompany Details
Secondary Contact Name:	Secondary Contact Email:
Claim Contact Name:	Claim Contact Email:
# of Technicians: # of Employees: Do	o you use subcontractors? Yes $\Box \mid$ No $\Box \mid$ Occasionally $\Box$
Do you have N.A.T.E. Certified Technician(s) Yes	No 🗆
Business Types: HVAC    Plumbing    Election   Plumbing   Plumbing   Election   Election   Plumbing   Plumbing	rical 🗆   Other
Customer Types: Residential Replacement 🗆   Resi	dential New Construction 🛛 📔 Multi Family 🛛
Commercial Replacement	Commercial New Construction   Other
Primary Equipment Brand:	_ Secondary Equipment Brand:
Annual # of Complete Installs: Annua	al # of Extended Warranties sold:
Do you offer financing? Yes 🛛   No 🗆 If so which I	Lenders:
Wholesa	aler & Rep Information
Wholesaler/Distributor: Wholesaler/Distributor City: Wholesaler/Distributor Rep/TM: coolCARE Rep/TM	



#### To help us better serve you please tell us about your company warranty information

Select	which	warranty	0	ntions	vou	would	liko '	to	offer
Select	WHICH	warranty	υ	puons	you	would	пке	ιΟ	oner.

□ 1-year | □ 2-year | □ 3-year | □ 5-year | □10-year | □12-year

Select which labor rates you will be purchasing:

□ \$125	🗆 \$175	Other
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Select which coverages you will need: Labor Only 🗆 | Parts & Labor 🗆 | Parts Only 🗆

Would you like a marketing? Yes □ | No □

Would you like sales training? Yes □ | No □

What best describes how you offer customers extended protection plans?

□ I include 10-12-year labor plans or OEM limited warranty matching terms on all installs

□ I include a short term protection plan on all installs and offer upgrade to match OEM limited warranty terms

□ I offer coverage as an add-on option

□ I only offer when a customers ask

□ I don't offer extended warranties

### ADDITIONAL IMPORTANT DOCUMENTS REQUIRED FOR ACCOUNT SETUP

- □ Copy of W-9 form \*w9 2018 revision date or newer (this allows us to pay you for claims)
- □ Copy of certificate of liability insurance form COI

\*Title holder for the Certificate of Insurance should be:

• coolCARE Protection Plans

Trinity Warranty Solutions, LLC

PO Box 5640, Villa Park, IL 60181

□ Copy of current trade license (if applicable per your industry)

 $\Box$  Copy of current driver license

#### **DEALER TERMS AND CONDITIONS**

□ I certify that the information contained in this application is true and complete to the best of my knowledge and that I have read the accompanying Dealer Service Agreement that apply to this enrollment form.

Owner Name:	 Date:	//
Owner Signature:	 	
-		



## **Dealer Service Agreement**

1. Authorized Service Dealer, upon request, will perform service and repair work on HVAC and Plumbing equipment for coolCARE contract holders when contract holders have a claim. The Service Dealer agrees to charge the manufacturer for labor and parts whenever they are covered under the manufacturer's warranty. coolCARE will not begin labor payment before the 91st day of receipt of contract sale. It is very important for you to know if the consumer's contract covers both part(s) and labor or if it covers only the part(s) or only the labor. If only one part(s) or labor is covered, it should be clearly stated on the consumer's contract.

2. Authorized Service Dealer must agree to perform the needed service and to repair the unit protected by coolCARE and Trinity Warranty as efficiently and reasonably as possible. Service shops must give a minimum of 90 days guarantee on labor and honor the standard manufacturer's warranty on parts they install. No claims for service parts or labor are paid until after manufacturer's warranty has been completed.

3. Authorized Service Dealer must not make any repair on a coolCARE contract without first checking the warranty date and terms of coverage. Prior authorization is required for the following repairs or replacement; Compressor, Heat Exchanger, and Coil. Only items covered by the warranty are subject for payment.

4. coolCARE requires that the following must be included on ALL claims.

- A. Servicer name, complete address, invoice number, and phone number.
- B. Customer's name, complete address, and phone number.
- C. Registration number, type and length of contract.
- D. Type of unit covered (such as condensing unit, furnace, compressor, etc.) and size of unit.
- E. Product manufacturer, model number and serial number.
- F. Date unit was purchased.
- G. Date of service.
- H. Nature of problem (symptoms).
- I. Type of service performed.
- J. List of part numbers used (even if still under manufacturer's warranty).
- K. Itemized list of charges.

L. Copy of distributor's invoice on all major parts replacements & current refrigerant invoice when claim request for it is made.

M. Customer's and service signature on all service/repair tickets must be kept on file by the dealer and made available to Trinity Warranty on request.

5. If any of the information outlined in Section 4 is missing, then the claim may be returned for additional information.

6. OEM/Distributor Part invoice must accompany ALL claims for repairs. Credit Memo for old part maybe requ& new part invoice must accompany claims.

7. "No problem found" calls are not covered. The consumer pays for such calls.

8. coolCARE contracts do not provide for two men per truck labor rates on residential products. Two men on roof mount and large ground mount units are covered for compressor replacement only.



9. coolCARE parts coverages pay actual part costs and the stated contractor mark-up on parts for applicable coverages. Parts may be requested to be returned to coolCARE for evaluation. Service labor is based on factory rate on service calls and the coolCARE labor allowance table. Labor is paid at the purchased reimbursement labor rate selected at registration.

10. All service work must be done during normal working hours. No after hours, weekend and holiday overtime allowed. Standard day rates will be paid. Only 1 labor allowance paid per service call at the highest repair allowance for performed repairs.

11. coolCARE will notify dealers and Trinity Warranty immediately for changes to labor allowance details. coolCARE agrees to provide at minimum 30 days advance notice of a rate change and the new rates are subject to Trinity Warranty approval. Current rates must be on file at all times. All invoices will be paid according to current approved rate on file.

12. Contracts can be sold on equipment less than two (2) years of age as through it were new with the term based off of the original install date and the rate not prorated.

13. Contracts must be registered with-in thirty (30) days of sale date. Delaying purchase may result in fee or rejection of coverage.

14. Authorized Service Dealer agrees coolCARE claims team may verify, if they desire, directly with the customer or holder of the contract, work performed for which the claim has been filed. Random audits will be performed.

15. coolCARE will pay Authorized Service Dealer \$1.00 per mile up to 30 miles one way outside the Service Provider's normal trade area. Defined as outside a 30 mile radius of the Service Provider's shop or office.

16. Claims must be submitted within sixty (60) days of service.

17. coolCARE reserves the right to assign contracts to other registered service dealer(s) if any of the following conditions are met: (a) service dealer fails to perform service work when requested to do so by coolCARE or the consumer, (b) service dealer ceases to operate as a business, (c) consumer requests such assignment to coolCARE or Trinity Warranty.

18. This agreement may be terminated by either party at any time upon sixty (60) days' written notice to the other party.

19. Capacitors replaced during maintenance calls are not covered.

20. In the event of any grounds for default or termination, coolCARE shall provide written notice to service dealer and request them to cure the default. If, within three working days of notice, the service dealer has not cured such default or provided coolCARE with adequate assurances that the default will be cured, then coolCARE reserves the right to assign the contract(s) to another registered service dealer. In the event of assignment or termination, coolCARE shall not be liable to the service dealer for any damages arising out of said assignment or termination, including but not limited to lost profits or revenues.

# **Coverage Allowance Table**

Claims can be submitted up to 60 days from the repair service date. Payments are reimbursed via check within 30 days from the approval of the coolCARE claims department.

No pre-Authorization needed if the agreement is active and repair is covered per the outline of the purchased agreement. Contractor Documents must be uploaded as a PDF and uploaded on all submitted claims. One labor allowance allowed per claim. Diagnostics/trip fees are included in the labor allowances. Maintenance calls are not included. Home and business owners are responsible for those charges.

Required Documents for all claims:

- Contractor work order with customer signature
- Distributor/Manufacturer part invoice for replacements parts & refrigerant claims

REFRIGERANT	JOB HOURS	ELECTRICAL	JOB HOURS
Compressor	4	Cad Cell	1
Accumulator	3	Circuit Board	1
Coil	3	Heater Element	1
Expansion Value	3	Contractor-Crank Heater	1
Header/Dist.	3	Defrost/Control	1
Metering Device	3	Limit Control	1
Reversing Value	3	Module	1
Check Value	2	Motor (Condenser/Blower)	1
Drier	2	Overload (External)	1
Leak Restriction	2	Relay/Capacitor	1
Muffler	2	Solenoid	1
Pressure Switch	2	Start/Assist	1
Receiver	2	Heat Sequencer	1
Service Value	2	Transformer	1
Refrigerant	Cost during repair	Misc. Wiring	1

MECHANICAL	JOB HOURS	COMBUSTION	JOB HOURS
Bearing	1	Heat Exchanger	4
Belt/Pulley	1	Blower Assembly	2
Damper	1	Burner	1
Drain Pan	1	Comb/Vent Blower	1
Fan/Blower	1	Gas Valve	1
Motor Mount	1	Igniter	1
Pulley Shaft	1	Flame Sensor	1
Misc.	1	Pilot Burner	1
Timer	1	Pump/Oil	1
PLUMBING	JO HOUF		APPLICABLE COVERAGE
Boiler Pump (Circul	ator) 2	Residential	
Storage Tanks (up t	o 100) 2		

Storage lanks (up to 100)	2	
Toilets Residential	1	All
Garbage Disposal	1	Со
Hot Water Dispenser	1	<b>C</b> 4
Whirpool Pump	1	\$1
Tankless Water Heater	1	\$5
Tank Replacement (up to 50)	2	\$1
Tank Replacement (51+)	3	
Pressure Relief Value	1	\$2
Sump Pump	1	-
Sewage or Sand Mound	1	
Well Pump	2.5	
Fireplace Heater	1.5	

1.5

Gar Hot Wh Tan Tan Tan Pre Sun Sev We Fire Pellet Stove

Residential		
All Parts	\$35 Flat Fee	
Commercial		
\$1 - \$50	\$15 Flat Fee	
\$50 - \$150	\$35 Flat Fee	
\$151 - \$250	\$50 Flat Fee	
\$250.00 up	\$75 Flat Fee	

Coverage Description Table

Labor Coverage - On policy description as (Labor) or (Labor Only) Start Date (91st day from purchase date) End Date (term length purchased from install or startup date)

Parts Coverage - On policy description as (Parts) or (Parts Only) Start Date (Selected start date and after **OEM** Expiration date) End Date (term length purchased from install or startup date)

> Parts Markup Coverage - On Policy description as (No PA) or (PA)

Eligible Mileage Coverage - On Policy description as (EMC) Max \$30 Defined by 1-way beyond 30 miles from dealer location, less than 60 miles from dealer location 1-way

Refrigerant Allowance - On policy description as (No Refrigerant) or (W/ Refrigerant Allowance) All Types Max (up to \$20 dealer cost per lb, 15 lbs per claim)

\*1 labor allowance paid per service call at the highest repair.