PREMIUM
Lawncare & Maintenance Inc.

402 County Road 250
Burnet, Texas 78611

(512) 507-7526
premium@premiumtx.com

Lawncare and Maintenance Service Agreement

Name Burnet County Courthouse Annex-Marble Falls Telephone (h) _____ (w) _____ (c) 512.755.9603

Service Address 810 Steve Hawkins Pkwy #1 Burnet Zip 78611 Turf Type Various

Billing Address _____ Zip _____ Sq. Ft. 40,000

Email: maintsupervisor@burnetcountytexas.org Gate Code: _____

CARE SERVICES

- FERT/WEED PROGRAM: Provides (5) applications per year to your turf. ____ @ $____ $____ yearly.
  **First application follow-up ** $____
- INSECT CONTROL: Provides coverage for turf damaging insects as needed. $____ yearly.
- DISEASE CONTROL: Provides coverage for active and preventative treatments. $____ yearly.
- FIRE ANT CONTROL: Provides coverage for active and preventative treatments. 2 @ $104 $208 yearly.
- SHRUB CARE: Provides fertilizer, insect and disease coverage as needed. ____ @ $____ $____ yearly.

MAINTENANCE SERVICES

- PREMIUM SERVICE: Includes mow, edge, blow, trim shrubs, weed beds and leaf cleanup, weekly or as needed ____ visits at $____ each $____ yearly.
- STANDARD SERVICE: Includes mow, edge, blow weekly or as needed ____ visits at $____ each $____ yearly.
- BASIC SERVICE: Includes mow, edge, blow (EOW) or as needed ____ visits at $____ each $____ yearly.

IRRIGATION SERVICES

- IRRIGATION: Check Irrigation System Monthly (Repairs billed separately) 12 visits at $75 each $900 yearly.

In order to provide our customers with the best possible service, it is important that you stay consistent with whichever program you choose. Irregular maintenance and care schedules are not considered beneficial to the integrity and aesthetic appeal of the lawn. Please notify our office if there is a problem financially or otherwise, so that we may work with you to provide a professional solution.

PAYMENT TERMS

In consideration of the foregoing services, the undersigned agrees to pay Premium Lawncare & Maintenance Inc. in the following manner:

Payable at:

Care $208 **(plus tax if applicable) on a** _____ **basis.**

Maintenance $_____ **(plus tax if applicable) on a** _____ **basis.**

Irrigation $900 **(plus tax if applicable) on a** _____ **basis.**

Total Maintenance Cost $_____ **monthly / $**1108 **yearly.**

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Lawncare and Maintenance Service Agreement

Name Burnet County Juvenile Bldg Telephone (h) _____ (w) _____ (c) 512.755.9603

Service Address 109 S Pierce Burnet Zip 78611 Turf Type Bermudagrass

Billing Address _____ Zip _____ Sq. Ft. 5,800

Email: maintsupervisor@burnetcountytexas.org Gate Code: _____

CARE SERVICES

• FERT/WEED PROGRAM:	Provides (5) applications per year to your turf.	5 @ $64	$320 yearly.
*First application follow-up *		$____	
• INSECT CONTROL:	Provides coverage for turf damaging insects as needed.		$134 yearly.
• DISEASE CONTROL:	Provides coverage for active and preventative treatments.		$____ yearly.
• FIRE ANT CONTROL:	Provides coverage for active and preventative treatments.	2 @ $52	$104 yearly.
• SHRUB CARE:	Provides fertilizer, insect and disease coverage as needed.	3 @ $69	$207 yearly.

MAINTENANCE SERVICES

• PREMIUM SERVICE:	Includes mow, edge, blow, trim shrubs, weed beds and leaf cleanup, weekly or as needed	____ visits at $____ each	$_____ yearly.
• STANDARD SERVICE:	Includes mow, edge, blow weekly or as needed	____ visits at $____ each	$_____ yearly.
• BASIC SERVICE:	Includes mow, edge, blow (EOW) or as needed	____ visits at $____ each	$_____ yearly.

IRRIGATION SERVICES

• IRRIGATION:	Check Irrigation System Monthly (Repairs billed separately)	12 visits at $50 each	$600 yearly.

In order to provide our customers with the best possible service, it is important that you stay consistent with whichever program you choose. Irregular maintenance and care schedules are not considered beneficial to the integrity and aesthetic appeal of the lawn. Please notify our office if there is a problem financially or otherwise, so that we may work with you to provide a professional solution.

PAYMENT TERMS

In consideration of the foregoing services, the undersigned agrees to pay Premium Lawncare & Maintenance Inc. in the following manner:

Payable at:

Care $765 **(plus tax if applicable) on a** _____ **basis.**

Maintenance $_____ **(plus tax if applicable) on a** _____ **basis.**

Irrigation $600 **(plus tax if applicable) on a** _____ **basis.**

Total Maintenance Cost $_____ **monthly / $**1365 **yearly.**

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premium@premiumtx.com

Lawncare and Maintenance Service Agreement

Name Burnet County Courthouse Annex-Burnet Telephone (h) _____ (w) _____ (c) 512.755.9603

Service Address 1701 E Polk Burnet Zip 78611 Turf Type Various

Billing Address _____ Zip _____ Sq. Ft. 27,000

Email: maintsupervisor@burnetcountytexas.org Gate Code: _____

CARE SERVICES

• FERT/WEED PROGRAM:	Provides (5) applications per year to your turf.	____ @ $____	$____ yearly.
	**First application follow-up **	$____	
• INSECT CONTROL:	Provides coverage for turf damaging insects as needed.		$____ yearly.
• DISEASE CONTROL:	Provides coverage for active and preventative treatments.		$____ yearly.
• FIRE ANT CONTROL:	Provides coverage for active and preventative treatments.	2 @ $91	$182 yearly.
• SHRUB CARE:	Provides fertilizer, insect and disease coverage as needed.	____ @ $____	$____ yearly.

MAINTENANCE SERVICES

• PREMIUM SERVICE:	Includes mow, edge, blow, trim shrubs, weed beds and leaf cleanup, weekly or as needed	____ visits at $____ each	$____ yearly.
• STANDARD SERVICE:	Includes mow, edge, blow weekly or as needed	____ visits at $____ each	$____ yearly.
• BASIC SERVICE:	Includes mow, edge, blow (EOW) or as needed	____ visits at $____ each	$____ yearly.

IRRIGATION SERVICES

• IRRIGATION:	Check Irrigation System Monthly (Repairs billed separately)	12 visits at $75 each	$900 yearly.

In order to provide our customers with the best possible service, it is important that you stay consistent with whichever program you choose. Irregular maintenance and care schedules are not considered beneficial to the integrity and aesthetic appeal of the lawn. Please notify our office if there is a problem financially or otherwise, so that we may work with you to provide a professional solution.

PAYMENT TERMS

In consideration of the foregoing services, the undersigned agrees to pay Premium Lawncare & Maintenance Inc. in the following manner:

Payable at:

Care $182 **(plus tax if applicable) on a** _____ **basis.**

Maintenance $_____ **(plus tax if applicable) on a** _____ **basis.**

Irrigation $900 **(plus tax if applicable) on a** _____ **basis.**

Total Maintenance Cost $_____ **monthly / $**1082 **yearly.**

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Lawncare and Maintenance Service Agreement

Name Burnet County Courthouse Telephone (h) _____ (w) _____ (c) 512.755.9603

Service Address 220 S Pierce Burnet Zip 78611 Turf Type St. Augustine

Billing Address _____ Zip _____ Sq. Ft. 21,700

Email: maintsupervisor@burnetcountytexas.org Gate Code: _____

CARE SERVICES

• FERT/WEED PROGRAM:	Provides (5) applications per year to your turf.	5 @ $160	$800 yearly.
*First application follow-up *		$_____	
• INSECT CONTROL:	Provides coverage for turf damaging insects as needed.		$390 yearly.
• DISEASE CONTROL:	Provides coverage for active and preventative treatments.		$492 yearly.
• FIRE ANT CONTROL:	Provides coverage for active and preventative treatments.	2 @ $86	$172 yearly.
• SHRUB CARE:	Provides fertilizer, insect and disease coverage as needed.	3 @ $124	$372 yearly.

MAINTENANCE SERVICES

• PREMIUM SERVICE:	Includes mow, edge, blow, trim shrubs, weed beds and leaf cleanup, weekly or as needed	_____ visits at $_____ each	$_____ yearly.
• STANDARD SERVICE:	Includes mow, edge, blow weekly or as needed	_____ visits at $_____ each	$_____ yearly.
• BASIC SERVICE:	Includes mow, edge, blow (EOW) or as needed	_____ visits at $_____ each	$_____ yearly.

IRRIGATION SERVICES

• IRRIGATION:	Check Irrigation System Monthly (Repairs billed separately)	12 visits at $75 each	$900 yearly.

In order to provide our customers with the best possible service, it is important that you stay consistent with whichever program you choose. Irregular maintenance and care schedules are not considered beneficial to the integrity and aesthetic appeal of the lawn. Please notify our office if there is a problem financially or otherwise, so that we may work with you to provide a professional solution.

PAYMENT TERMS

In consideration of the foregoing services, the undersigned agrees to pay Premium Lawncare & Maintenance Inc. in the following manner:

Payable at:

Care $2226 **(plus tax if applicable) on a** _____ **basis.**

Maintenance $_____ **(plus tax if applicable) on a** _____ **basis.**

Irrigation $900 **(plus tax if applicable) on a** _____ **basis.**

Total Maintenance Cost $_____ **monthly / $**3126 **yearly.**

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