## **UltraHome Pre-Sale Questionnaire**

Please complete the form to the best of your ability. If you do not know, please leave blank.

**Personal Information** *Please type your answers* 

| Name:    |        |
|----------|--------|
| Address: |        |
| Email:   | Phone: |

Water Source Use the checkboxes and type applicable answers

|   | Treated by a Provider   | Name of provider: |  |  |
|---|-------------------------|-------------------|--|--|
| Well Please complete 'Well Water Details' section |                         |                   |  |  |
| Ī   | Other (please specify): |                   |  |  |

Water Quality Concerns and Goals Use the checkboxes and type applicable answers

| Taste Issue?      | Yes | No | Please describe:                 |
|-------------------|-----|----|----------------------------------|
| Odor Issue?       | Yes | No | Hot water only? Please describe: |
| Staining?         | Yes | No | If yes, what color?              |
| Film/Slime?       | Yes | No | Please describe:                 |
| Hard water scale? | Yes | No | Areas:                           |

What are your goals for the water in your home?

**Installation Details** *Use the checkboxes and type applicable answers* 

| Location            | Inside | Outside |                   |
|---------------------|--------|---------|-------------------|
| Pipe Size           | 3/4"   | 1"      | Other:            |
| Irrigation on loop? | Yes    | No      |                   |
| Pool/spa on loop?   | Yes    | No      | How many gallons? |

**Well Water Details** *Use the checkboxes and type applicable answers* 

| Туре                        | Community | Private                |             | Unsure               |
|-----------------------------|-----------|------------------------|-------------|----------------------|
| If Community, name of well: |           |                        | Private? Da | ate of current test: |
| Well Depth:                 |           | Well Production (GPM): |             |                      |
| Installation in Well House? |           | How far from main      | house?      |                      |
| Well House Uphill/Downhill? | Uphill    | Downhill               |             | Neither              |
| Pipe size in Well House     | 3/4"      | 1"                     |             | Other:               |

**Existing Pre-Treatment** *Use the checkboxes and type applicable answers* 

| = mounts of the checkboxes and type approaches another |                 |                         |                    |  |
|--|-----------------|-------------------------|--------------------|--|
| Are you using any other water treatment products?      |                 | Yes                     | No                 |  |
| If yes, please let us ki                               |                 |                         |                    |  |
| Salt Softener  | Reverse Osmosis | Whole House Filter      | IO or Iron Breaker |  |
| UV Light   | pH Correction   | Other (please specify): |                    |  |

## Acknowledgement

## **CUSTOMER Acknowledgement**

UltraWater Solutions (UWS) products are tested in independent certified labs using EPA Standard(s). Specific performance may be limited by environmental or hygienic conditions unique to your water including but not limited to:

- Use of the product(s) with a microbiologically-contaminated source water.
- Use where the system is exposed to extreme heat or freezing temperatures.
- Seasonal source water quality variation will impact system performance. Test results show potential contaminant reductions; they are not a guarantee of performance.

**Installation** should be performed by a licensed and bonded plumber or contractor only to ensure: a) proper installation 2) adherence to building codes 3) protection against liability. The customer **assumes full liability** for installation and any direct, incidental, or consequential damages caused by leaks, flooding, water damage, or malfunction(s) related to installation.

**Well water** (if applicable). Well owners are responsible for the testing, disinfection and treatment of the well. Private wells should be tested annually for coliform bacteria and nitrate. The US EPA recommends shocking your well with chlorine.

**Consultation / Assistance:** Customers are encouraged to reach out to our customer service team for any guidance or clarification needed regarding the installation of our products.

**Product Warranty** covers defects in materials and workmanship under normal use and excludes improper installation, environmental conditions or misuse of the product. View <u>FULL WARRANTY INFO</u>.

| My dealer set the expectation that the salt-free system is highly effective, with scientific proof that it removes existing scale from plumbing. This process is temporary and highlights the system's performance. During this phase, I |                   |
|--|-------------------|
| understand that I may notice particles, flaking, or in rare cases, sludge in my water.   | CUSTOMER INITIALS |
|  | r                 |
| By purchasing products from UWS, you acknowledge and accept the foregoing. By purchasing products from UWS, I acknowledge and accept the terms and conditions as set   |                   |
| forth herein. By checking the box, I acknowledge and agree that my electronic signature has the same legal validity as, and is the equivalent of, my handwritten signature in  |                   |
| accordance with the U.S. Electronic Signatures in Global and National Commerce Act.  | I AGREE           |
|  |                   |
| TYPE YOUR NAME HERE:   |                   |
|  |                   |
| Date:  |                   |