

Equipment Service Maintenance Agreement

Agreement No.: _____

Date: _____

Client Name: _____

Service Provider: _____

Client Address:

Provider Address:

1. Scope of Services

The Service Provider agrees to provide equipment maintenance and service as specified below.

2. Equipment Covered

Equipment Description	Model/Serial Number	Location
_____	_____	_____
_____	_____	_____

3. Service Schedule

Service Frequency: _____

Next Scheduled Service: _____

4. Fees & Payment

Service Fee: _____

Payment Terms: _____

5. Terms & Conditions

1. All maintenance will be performed during normal business hours unless otherwise agreed.
2. Replacement parts and additional repairs will be invoiced separately unless specified.
3. The agreement is valid for a term of _____ months from the agreement date.
4. Either party may terminate this agreement with _____ daysâ€™ written notice.

6. Acceptance

By signing below, both parties agree to the terms and conditions of this agreement.

Signature (Client):

Name & Date

Signature (Provider):

Name & Date