

# CONTRACTED SERVICE PROVIDER REFERRAL

**The respective Rep. Agency must make the recommendation.**



**Fax Form To:**  
423-283-8034

**Today's Date:**  
(mm/dd/yyyy) \_\_\_\_\_

**Or Email To:**  
fieldservicesupport@hotwater.com

Service Provider Information			
Company Name	<p>An A.O. Smith Water Products contracted service provider will be an independent contractor whose main job is servicing and repairing gas, and electric water heaters. The representatives will not be an employee or partner with any A.O. Smith manufacturer representative organization or distributor. In addition, the candidate service provider will have demonstrated quality and professionalism in the marketplace in workmanship, reputation, and references and must pass both a background check and the appropriate proficiency tests.</p> <p><b>The bottom portion of this form MUST be signed by the Rep. Agency, not the potential Provider.</b></p>		
Contact Name			
Address			
City		State	Zip Code
Phone #			
Fax #			
Mobile Phone #			
Email Address			

A.O. Smith Brands Included in Contract	Type of Equipment Serviced								
<table> <tr> <td>A.O. Smith Pro Line</td> <td>U.S. Craftmaster</td> </tr> <tr> <td>State</td> <td>American</td> </tr> <tr> <td>Reliance</td> <td>Takagi</td> </tr> <tr> <td>A.O. Smith Signature</td> <td></td> </tr> </table>	A.O. Smith Pro Line	U.S. Craftmaster	State	American	Reliance	Takagi	A.O. Smith Signature		<input type="checkbox"/> Residential Gas / Electric <input type="checkbox"/> Commercial Atmospheric <input type="checkbox"/> Commercial High Efficiency <input type="checkbox"/> Commercial Specialty <input type="checkbox"/> Commercial Electric <input type="checkbox"/> Hot Water Boiler <input type="checkbox"/> Residential / Commercial Tankless <input type="checkbox"/> Commercial Start-Up <input type="checkbox"/> Whole House Filter Installation
A.O. Smith Pro Line	U.S. Craftmaster								
State	American								
Reliance	Takagi								
A.O. Smith Signature									
<p><b>What other brands do you service?</b></p> <table> <tr> <td>Rheem / Ruud</td> <td>Raypak</td> </tr> <tr> <td>Bradford White / Laars</td> <td>Lochinvar</td> </tr> <tr> <td>PVI</td> <td>Other (please specify)</td> </tr> <tr> <td></td> <td>_____</td> </tr> </table>	Rheem / Ruud	Raypak	Bradford White / Laars	Lochinvar	PVI	Other (please specify)		_____	
Rheem / Ruud	Raypak								
Bradford White / Laars	Lochinvar								
PVI	Other (please specify)								
	_____								
<p><b>Offers 24/7 Service?</b></p>									

Submitted by: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Submitting Firm: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_

**Fax completed form to 423-283-8034 or email to fieldservicesupport@hotwater.com**