

Computer Physicians, LLC
HANDYMAN WORK AUTHORIZATION AND WAIVER OF LIABILITY

I, _____ grant permission to Computer Physicians, LLC and it's owner "Steve Paulick" to perform Handyman work for the client/homeowner. Furthermore, I release Computer Physicians, LLC, Steve Paulick, it's owner, president, or any employees or subcontractors from any liability for any which may occur during attempted repair, installation, construction or at any other time. Computer Physicians, LLC is not responsible for loss of profit or any direct, indirect, special, incidental, or consequential damage occurring during or after handyman service. **ALL CLAIMS FOR LIABILITY AND/OR LOSS INCLUDING WITHOUT LIMITATION ANY INDIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES WHICH MAY OCCUR AS A RESULT OF ANY COMPUTER PHYSICIANS, LLC ACTION (OR INACTION) ARE HEREBY EXPRESSLY WAIVED.**

Payment: I understand that payment is due in full at the time of service, unless specified in writing on the work order. Work will be billed at \$99 per hour plus a travel fee and parts and supplies are extra. There may be an extra charge for emergency fast service. Charges are binding whether service is successful or not. If the customer is unsatisfied with any of the repairs or service, the customer must notify the handyman before he leaves the premises. The client acknowledges that there is a \$40.00 fee for any returned checks.

Estimated Completion Time: Computer Physicians, LLC will provide an estimated completion time for your handyman work. Unforeseen circumstances may have an impact on our ability to complete the handyman work as provided in the estimate. I understand that most small handyman work will take from between 1 to 14 days, sometimes longer. Longer if parts and supplies must be ordered.

Scope of Work: Computer Physicians, LLC will perform the work agreed upon verbally. You must authorize, either verbally, in writing or via an authorized email address, any additional work which may be required.

Ownership: You must be the home owner or be an authorized agent representing the owner of the house/building/land that you are having handyman work being done.

Right to Refuse: In its sole discretion, Computer Physicians, LLC reserves the right to refuse work that it believes is beyond the scope of its ability or for other good cause.

Warranty: Computer Physicians, LLC makes no warranty or guarantee as to the success of its attempts. We will demonstrate that the handyman work is complete at the time of completion.

The customer agrees:

I certify that I am the expressed owner of the house/building/land described on the work order. In the event that I am found not to be the true expressed owner of this house/building/land, I assume all liability for any claim made as the result of the services rendered by Computer Physicians, LLC on this house/building/land including those claims which assert negligence on the part of Computer Physicians, LLC. I agree to release, indemnify, and hold harmless Computer Physicians, LLC, and Steve Paulick from liability for any claims or damages of any kind or description that may arise from any work performed on my house/building/land. The home owner agrees that it is their responsibility to have the work inspected by a licensed inspector to make sure the work was done up to code and to notify the contractor if changes need to be made. I understand that Computer Physicians, LLC offers no verbal or written warranty, either expressed or implied, regarding the success of this service. I expressly waive all claims against Computer Physicians, LLC or any damages to this house/building/land.

MY SIGNATURE BELOW CONFIRMS THAT I HAVE READ, UNDERSTAND, AND AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS. AND THAT A COPY OF THIS FORM CAN BE VIEWED ANY TIME ON OUR WEBSITE AT <https://www.computer-physicians.com/bill-pay/>

Printed Name: _____ **Company Name:** _____

Signature: _____ **Date:** _____