



**GENERAC**



Mail To: American Air Systems, Inc  
 Attn: Jamie PO Box 7017  
 Beaumont, TX 77726  
 Website: [www.amerair.com](http://www.amerair.com)  
 Phone: (409) 842-2402 or (409) 751-5001  
 License #: TACLA28828R RMP# 44333

## The American Air Systems, Inc. "Annual Wellness Check" for your Home Stand-by Generator

Our goal is to maintain and extend the life of your back-up emergency system.

Generator Operational checks will be scheduled to be completed Monday thru Friday 7:30 am - 4:30 pm.

### We will test and check the following **ONCE** per contract;



Air Cooled or Liquid Cooled Generator  
and the Automatic Transfer Switch



- Change Engine Oil and dispose at a collection center (We use regular oil unless requested otherwise)
- Change Oil and Air Filters
- Change and Gap the Spark Plugs
- Check the Coolant level (liquid cooled generator only)
- Check Battery (Generac recommends replacement every 3 years)
- Adjustment of the valves
- Upgrade the Firmware (if applicable)
- Check Operations of the Generator and the Automatic Transfer Switch
- Simulate a power failure to the home / business
- Test the Volts, Amps and Hertz of the generator
- Verify the sequence of operation
- Return the home / business to utility power
- Check exercise date / time
- 10% Service Discount\* on repairs ( \*excludes Diagnostic Fee)

**\*Contract and Service Pricing Discount Valid for One (1) Year After Approval Date\***

**You can now pay online at <https://www.amerair.com/pay-online>. Use your LAST NAME as the INVOICE #.**

Name: _____	Type of Generator	<b>Air Cooled</b>
Address: _____	Size of Generator	22 kW
	Battery Type & Due Date	Group 26R - 2025
Phone: _____	Yearly Generator Service Plan	Plan Price \$ <input type="checkbox"/>
	Upgrade to Synthetic Oil	\$ <input type="checkbox"/>
	Add Battery (check box to add)	\$ <input type="checkbox"/>
	Add <b>Opt A</b> (check box to add)	\$ <input type="checkbox"/>
	Add <b>Opt B</b> (check box to add)	\$ <input type="checkbox"/>
Email: _____	<b>Total Investment</b>	(Total all boxes here) \$
Maintenance Due by: _____	<b>*Generator Operational Check must be PREPAID to receive this pricing</b>	
Approval Signature <b>X</b> _____	Date: _____	

### Home Surge and Generator Protection Enhancements Options Available

#### Home Surge Protection (**Option A**)

Three (3) replaceable IModules  
 10 year product warranty  
 Protect TV's, computers and all of  
 your homes electrical appliances



**To be installed on the next visit**

#### Attention:

#### Synthetic Oil Users

Please note that once you  
 switch to SYNTHETIC OIL you  
 will be required to use  
 SYNTHETIC OIL each time.

#### Generator Surge Protection (**Option B**)

Protects against damaging surges and  
 transients blocking them from entering  
 your home or business.  
 Follows NEC 2020 (National Energy Code)



**To be installed on the next visit**