

FLORIDA SERVICES SOLUTIONS INSTALLED SALES CONTRACT

CUSTOMER NAME

LOWE'S AUTHORIZED REPRESENTATIVE

Richie Kahl	ich	1649239	10/13/2020	Loza Balfe	our			
STORE NO. STREET ADDRESS				STREET ADDRI	ESS			
0179	3463 NW B	3463 NW Bascom Norris Dr			1633 NW Nash Rd			
CITY	STATE ZIP		ZIP	CITY	STA	TE ZIP		
Lake City FL		_	32055	Lake City	FL	. 320	055	
TELEPHONE				TELEPHONE	TELEPHONE			
386-719-6622				386-752-5	386-752-5216			
EMAIL				EMAIL				
richie.g.kah	lich@store.low	es.com						
LOWE'S CONTRACTOR LICENSE # LOWE'S REPRESENTATIVE LICENSE #				CREDIT/DEBIT	CHECK	LCC CARD GIFT	CARD	
CCC1326824, CGC1508417, CRC1327732, FRO4517, FRO1584, FRO6140			(If Applicable)	✓				
"NOTICES," "TE FOLLOWING PA	ERMS AND C GES BEFORE	ONDITIONS,		act." PLEASE READ DENDUM" CONTA				
installation street address 1633 NW Nash Rd				e City	FL		32055	
Install (2)	Atruim F	Reliablit	312 Se	ries White rim, Install	Vinyl Slide	er Doors w		
				Vindows w				
Grids. Pri					_ ,	9		
01100.111		100 10 /0	7 1 101110	/ •				
Door FL (Code #'s	116 <i>1</i>	6 1					
Window F	-L Code	#'S 20	1100.2					
				-	CONTRACT TOTAL (INCLUDING TAX) \$5,622.87			
Work is to com	mence upon re	easonable av	ailability of C	Contractor and/or			ade Good(s)	

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___ [fill in date].

which is anticipated to be $\frac{11/30/2020}{11/30/2020}$ [fill in date]. Estimated completion date is $\frac{12/31/2020}{11/30/2020}$