

# PRESS RELEASE

[Your Business Name & Address]  
[000-000-0000]  
For Immediate Release  
Date: [Month/Date/Year]

Contact: [Owner/Marketing Rep]

Phone: [000-000-0000]  
Fax [000-000-0000]  
Email [abcrestoration.com]

**[Owner or Marketing Rep's Name]** of **[Your Company]** of **[Your Town]**, is pleased to announce the introduction of the Company's "Got A Leak Program™".

The "Got A Leak™" Program was specifically designed to enhance the service experience associated with plumbing repairs and the follow up cleaning & drying services for residential and commercial property owners, as well as to reduce the overall repair cost by providing a system of responsive service calls.

Our firm is a **[full service or specialty drying company]** that responds to **[hundreds or thousands]** of water damage claims in the **[Your Service Area]** annually. We know from experience that the longer unwanted water is allowed to remain in the structure, the more likely it is that severe damage will occur, which ultimately leads to significantly higher repair cost, said **[Owner/Marketing Rep Name]**

**[Your Company]**, in conjunction with the Got A Leak Program, developed a one stop call experience for those in the community who may have the misfortune of experiencing a water damage event, or for those needing the services of high quality plumbing repair.

Our plumbing network system provides local plumber referrals free of charge to the community. All plumbing contractors listed in the program have met or exceeded exacting qualifications which include availability, experience, and dedication to high quality customer service.

**[Owners Name]** has been involved in the cleaning & restoration business since **[Year Formed]**.

For more information regarding the "Got A Leak Program™" you may visit the company's website at [www.\[Your Website Address\]](http://www.[Your Website Address]) or by calling **[Your Business Number]**.

Attached/Enclosed is a Got A Leak Logo and a picture of [Owner or Marketing Rep]. *[Note; it always needs to be the same person who was mentioned in the press release]*

[END]

[Your Company] Referral Network

Company Name: \_\_\_\_\_

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

Office Telephone Number: (    ) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ Fax: (    ) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Website: www.\_\_\_\_\_

Email of contact person: \_\_\_\_\_

Years in business: \_\_\_\_\_ Number of employees: \_\_\_\_\_

Service area: \_\_\_\_\_

**Type of service(s) offered** (please check all that apply):

New construction    Emergency repair    Sewer/line cleaning    HVAC    24/7    8-5

Telephone answered live:  Yes  No

If no, do you have an emergency contact number (    ) \_\_\_\_\_

Service Call Fee During work hours: \$ \_\_\_\_\_

Service Call Fee After hours: \$ \_\_\_\_\_

Do you carry workman's Comp:  Yes  No

Do you carry liability insurance:  Yes  No Amount \$ \_\_\_\_\_

Payment method:  COD    Checks accepted    Net 15    Net 30

Do you accept credit cards:  Yes  No