



**Company Name**

Total Comfort

**City**

Ormond Beach

**State**

FL

**Contact Name (First and Last)**

Total comfort

**Email**

[kristinedan73@gmail.com](mailto:kristinedan73@gmail.com)

**Phone**

(386) 361-5500

**Website**

<https://totalcomfortfl.com/>

**Do you have a UF Supplier ID?**

Unknown

**Is the owner a UF alum?**

Unknown

**General Description of Services**

- Distribution and Conditioning Systems Equipment (HVAC)
- Electrical Systems and Lighting and Components and and Supplies
- Plumbing Fixtures