

UNITED A/C, REFRIGERATION PLUMBING & HEATING, INC.

201 ANN ST
NEWBURGH, NY 12550

(845) 561-5030
Fax (845) 561-0038

BILL TO

CMI

HVAC SERVICE ORDER INVOICE

INVOICE

423195

NAME US Army Reserve Center	
STREET 113 Route 303	DATE 12-13-19
CITY Oranburg NY 10962	PROMISED
PHONE	CALL BEFORE <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
TECHNICIAN Allison	AUTHORIZED BY
WORK TO BE PERFORMED No Heat Classroom 120-123	
P.O. #	

THIS WORK IS TO BE		
<input type="checkbox"/> C.O.D.	<input type="checkbox"/> CHARGE	<input type="checkbox"/> NO CHARGE
MAKE <i>Carmen</i>	MAKE	
MODEL <i>481ME006-A</i>	MODEL <i>5701</i>	
SERIAL NUMBER <i>1606650533</i>	SERIAL NUMBER	

STREET 113 Route 303		DATE 12-13-19	ENVIRONMENTAL CHECK LIST			RECOMMENDATIONS Replace RTA #3
CITY Orangburg NY 10962		PROMISED		<input type="checkbox"/> RECOVERED	QTY.	TYPE/DISPOSITION
PHONE		CALL BEFORE □ A.M. □ P.M.		<input type="checkbox"/> RECYCLED		
TECHNICIAN Ali Sma		AUTHORIZED BY		<input type="checkbox"/> RECLAIMED		
WORK TO BE PERFORMED No Heat Classroom 120-123				<input type="checkbox"/> RETURNED		
P.O. #				<input type="checkbox"/> DISPOSAL		
				<input type="checkbox"/> DISMANTLED		TOTAL \$
QTY.	MATERIALS & SERVICES		UNIT PRICE	AMOUNT	DESCRIPTION OF WORK PERFORMED	
1	REFRIGERANT R- Danfoss T-Stat RA 2000	LBS.			<p>Found T-Stat labeled (as asset #9982) in Facility manager office for Class Rooms off. Turned on T-Stat. Note: This T-Stat on base board Heat & Using circulator #3. Check T-Stat on base board. Replaced base board T-Stat for Class Room 121. base board Heat working OK. Must keep T-Stat on in Facility manager office RTA #3 has bad Heat exchanger. There is lot of corrosion in burner area and in duct area RTA #3 for classroom's 120, 121, 122, 123</p>	
TOTAL MATERIALS						
HRS.	LABOR		RATE	AMOUNT		
	Ali Sma					
TOTAL LABOR					LIMITED WARRANTY: All materials, parts and equipment are warranted for one year from the date of installation.	
					TOTAL SUMMARY	

TERMS
All sums due hereunder, if not paid within THIRTY (30) days of the above date, shall bear interest at the rate of 1.5% per month. In the event litigation is commenced to collect any sums due hereunder, the prevailing party in such action shall be entitled to an award of reasonable attorney's fees.

erty to order the work outlined above which has been satisfactorily completed. I agree that title to equipment/materials furnished until final payment is made. If payment is not made, I can remove said equipment/materials at Seller's expense. Any damage resulting from not be the responsibility of Seller.

20191213
DATE

DATE

LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.

REGULAR WARRANTY
 SERVICE CONTRACT

SERVICE CONTRACT

Thank You

TOTAL SUMMARY		
TOTAL MATERIALS		
TOTAL LABOR		
TAX		
TOTAL		

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2003-07-28 8:30

222 1960 1960

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: Army Reserve com+er Date of Visit: 12-13-19

Contractor Personnel on Site:

1. Pat
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. _____
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. _____
2. _____
3. _____
4. _____

Other Recurring Services

1. _____
2. _____
3. _____
4. _____

Service Calls – Service Call Number and Description

1. CSS 22960
2. _____
3. _____

Over and Above Repair Work – Order Number and Description of Work Completed

NU Heat + in CLASS Room 120-123
Replaced T Stat + in CLASS Room 121
For Baseboard Heat. Turn on T-Stat +
in Facility manager office for
classroom Heat

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _____ Date: _____

Signed: _____

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: R. G. G. S. S. Date: 2015/12/13

Signed: Patricia Bandy

E-Mail: _____

UNITED A/C, REFRIGERATION PLUMBING & HEATING, INC.

201 ANN ST
NEWBURGH, NY 12550

(845) 561-5030
Fax (845) 561-0038

HVAC SERVICE ORDER INVOICE

423435

BILL TO

NAME	#1029 US Army Reserve Center	
STREET	123 RT 303	DATE 11/27/20
CITY	Orangeburgh NY	PROMISED
PHONE	CALL BEFORE	
TECHNICIAN	AUTHORIZED BY	
WORK TO BE PERFORMED	JULY 1st 2018 RTU #3 Replaced	

THIS WORK IS TO BE		
<input type="checkbox"/> C.O.D.	<input type="checkbox"/> CHARGE	<input type="checkbox"/> NO CHARGE
MAKE	MAKE	
MODEL	MODEL	
SERIAL NUMBER	SERIAL NUMBER	

STREET 123 RT 303		DATE 11/27/20		ENVIRONMENTAL CHECK LIST			RECOMMENDATIONS		
CITY > Orangeburgh NY		PROMISED		WORK PERFORMED		TYPE/DISPOSITION			
PHONE		CALL BEFORE		<input type="checkbox"/> A.M.		<input type="checkbox"/> P.M.			
TECHNICIAN JG Steve M		AUTHORIZED BY		<input type="checkbox"/> RECOVERED		<input type="checkbox"/> RECLAMED			
WORK TO BE PERFORMED RTU #3 Replacement				<input type="checkbox"/> RECYCLED		<input type="checkbox"/> RETURNED			
P.O. #				<input type="checkbox"/> DISPOSAL		<input type="checkbox"/> DISMANTLED			
				<input type="checkbox"/> CHANGED OUT/REPLACED		TOTAL \$			
QTY.	MATERIALS & SERVICES		UNIT PRICE		AMOUNT		DESCRIPTION OF WORK PERFORMED		
1	REFRIGERANT R- LBS. Bryant RTU Crane						<p>Removed existing carrier RTU #3, Installed new Bryant RTU. Burnt off heat exchanger. Start and tested in Heat & cool mode</p>		
	FILTERS X X								
>	FILTERS X X								
	BELTS								
TOTAL MATERIALS									
HRS.	LABOR		RATE		AMOUNT				
	JG Steve M								
TOTAL LABOR									
<p>LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturer's or supplier's standard warranty.</p>									
TOTAL SUMMARY									

TERMS

All sums due hereunder, if not paid within THIRTY (30) days of the above date, shall bear interest at the rate of 1.5% per month. In the event litigation is commenced to collect any sums due hereunder, the prevailing party in such litigation shall be entitled to an award of reasonable attorney's fee.

I have authority to order the work outlined above which has been satisfactorily completed. I agree that Seller retains title to equipment/materials furnished until final payment is made. If payment is not made as agreed, Seller can remove said equipment/materials at Seller's expense. Any damage resulting from said removal shall not be the responsibility of Seller.

CUSTOMER SIGNATURE

DATE

LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.

REGULAR WARRANTY
 SERVICE CONTRACT

Ch. 10

Thank You

TOTAL

TOTAL SUMMARY		
TOTAL MATERIALS		
TOTAL LABOR		
TAX		
TOTAL		

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: _____ Date of Visit: 1/27/2020

Contractor Personnel on Site:

1. <u>JAY LANIERI</u>	4. _____
2. <u>STEVE MESSINA</u>	5. _____
3. _____	6. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. _____
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. _____
2. _____
3. _____
4. _____

Other Recurring Services

1. _____
2. _____
3. _____
4. _____

Service Calls – Service Call Number and Description

1. CSS22960 - Replace RTN #3
2. _____
3. _____

ATTACHMENT J-0200000-05
FORMS

Over and Above Repair Work – Order Number and Description of Work Completed

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jay Rancier Date: 1/27/2020

Signed: _____

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed: **156**

Print Name/Rank: Patrick T. Scanlon Date: 1/28/2019 AFOS

Signed: Patrick F. Scalise

E-Mail: Patrick.t.Scarborough.Ctr@mail.mil