

4845

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: 11-14-19

Contractor Personnel on Site:

- | | |
|------------------|----------|
| 1. <u>Mike D</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

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

- | | |
|---------------|-------|
| 1. <u>N/A</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

Inspection, Testing, and Certification

- | | |
|---------------|-------|
| 1. <u>N/A</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

Other Recurring Services

- | | |
|---------------|-------|
| 1. <u>N/A</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

Service Calls – Service Call Number and Description

- | | |
|---------------------|--------------------------------|
| 1. <u>CS# 22375</u> | <u>Leak in Kitchen ceiling</u> |
| 2. _____ | _____ |
| 3. _____ | _____ |

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

CSS# 22375 Located Leak @ BOTH UNIONS & 90°
@ Hot Water supply line. AHU HAS BEEN CONDENSED
FOR SEVERAL YEARS, VALVED OFF HOT WATER LINE
DRAINED WATER OUT OF COIL

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name:

Michael Duff

Date:

11-14-19

Signed:

Michael Duff

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:

Mike Moaeman

Date:

11/14/19

Signed:

Michael Moaeman

E-Mail: michael.moseman.ctr@mail.mil



4845

Energy Management Technologies, LLC
Service 518-631-6004 Main 518-783-7810 Fax 518-783-2079

FIELD REPORT

Location Name / Address Kollerdam Army Reserve		Bill To HOLF	Date 11-14-19
Contact / Phone CSS# 22375		Service Contract #	Installed Contract #
Technician Code <input type="checkbox"/> Contract <input checked="" type="checkbox"/> T & M <input type="checkbox"/> Quoted <input type="checkbox"/> Warranty <input type="checkbox"/> Sales Support <input type="checkbox"/> Material Sale Only			

Problem Description:

JOBSITE SAFETY CHECKLIST	WORK PERFORMED
<input type="checkbox"/> Electrical Shock Hazards	LOCATED LEAK @ HOT WATER LINE FOR KITCHEN AHU. AHU HAS BEEN MAINTAINED FOR SEVERAL YEARS. VALVED OFF AHU H.W. COIL FROM MAIN LOOP, DRAINED COIL.
<input type="checkbox"/> Confined Space	
<input type="checkbox"/> Inadequate Ventilation	
<input type="checkbox"/> Water/Oil/Other Liquids on Floor	
<input type="checkbox"/> Trip or Fall Hazards	
<input type="checkbox"/> Fire or Explosive Hazards	
<input type="checkbox"/> Site Checked	

REFRIGERANT ACTIVITY
Did Refrigerant Activity occur?
<input type="checkbox"/> Yes If yes, a Refrigerant Activity
<input type="checkbox"/> No Report Must be completed

SERVICE EXPENSE	PARTS and MATERIAL				
PARTS, MATERIAL SOURCE	Source	Qty	Part #	Description	PO #
<input type="checkbox"/> CS Customer Supplied					
<input type="checkbox"/> PC Procurement/Cash					
<input type="checkbox"/> TS Truck					
<input type="checkbox"/> TP EMTech Parts					
<input type="checkbox"/> VP Vendor Purchase					

EXPENSE TYPE (CHECK ALL THAT APPLY)	LABOR						
	Date	Name	DDC (Tech)	MS (Mech)	Reg/Other Time	Over Time	Double Time
<input type="checkbox"/> Sm Recovery Sys	11-14-19	W. H. 160		X	3		
<input type="checkbox"/> Lg Recovery Sys							
<input type="checkbox"/> Vacuum Pump							
<input type="checkbox"/> Welder							
<input type="checkbox"/> Tube Brush Unit							
<input type="checkbox"/> Technology Charge							
<input type="checkbox"/> Fuel Charge							
<input type="checkbox"/> Environment Fee							
<input type="checkbox"/> Trip Charge							
<input type="checkbox"/> Pressure Washer							
<input checked="" type="checkbox"/> Mileage							
<input checked="" type="checkbox"/> Misc. Supplies							

Follow-up Required? ☐ Yes ☐ No Describe

Customer Signature	Date 11-14-19	PO # CSS 22375
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White - EMTech

Yellow - Processing

Pink - Customer

Services described were performed as part of the terms of this document