



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

5622

FIELD REPORT

FIELD REPORT							
Location Name/ Address <u>Army New Windsor</u> Contact / Phone		Bill To <u>WO 7326</u>		Date			
		Service Contract # <u>6021788</u>		Installed Contract #			
		Technician Code		<input type="checkbox"/> Contract <input checked="" type="checkbox"/> T & M <input checked="" 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 <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		replaced ductless split. checked operation everything working perfectly.					
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, 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)							
Sm Recovery Sys							
Lg Recovery Sys							
Vacuum Pump							
Welder							
Tube Brush Unit							
Technology Charge							
Fuel Charge							
Environment Fee							
Trip Charge							
Pressure Washer							
Mileage							
Fisc. Supplies							
LABOR							
Date	Name		DDC (Tech)	MS (Mech)	Reg/Other Time	Over Time	Double Time
10/19/20	Dan R			X	8		
10/19/20	Mike D			X	8		
10/6/20	Dan R			X	4		
10/6/20	Mike D			X	4		
Follow-up Required? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe							
Customer Signature				Date	PO #		
e - EMTech				Yellow - Processing		Pink - Customer	
						Services described were performed	

Follow-up Required? Yes No Description:

Customer Signature

Date _____ PO # _____

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