

EMTech dba / Energy Management Technologies, LLC  
 5 Hemlock Street  
 Latham, NY 12110  
 Phone # (518) 783-7810

# Invoice

Date	Invoice #
9/17/2021	6759

Bill To

CMI Management, Inc.  
 PM / 99th - Region 2  
 5285 Shawnee Road Suite #510  
 Alexandria, VA 22312

Project	P.O. No.	Terms	Due on receipt	
19801 Army Reserve T & M by Location	CSS# 31545	Due Date	9/17/2021	
Description	Qty	Rate	Serviced	Amount
Dave Ogden - Emergency Service Call - Sunday Bullville ARC CSS# 31545 - No water going to pump house. Call for pumps squealing and not pumping anything. Found call was for domestic water. Booster pumps shut off at storage tanks at approximately 800 gallons each with well water pumps not filling tanks and chlorine feed pump controller plugged into a lead cord and coiled up outside overhead door. Tank on right was a disc on the bottom of the tank that I believe is to trigger sensors and should be floating around fill pump. All GFI outlets will not reset to operate chlorine pump except the one under the catwalk that defective sump pump is plugged into. Sergeant Brecky to take well pump out of hand. Mechanical HVAC Sunday & Holiday discounted 5% southern county service contract labor rate.	5.5	210.00	7/11/2021	1,155.00T
1 Trip (S) Mileage , Vehicle, Delivery, Charges	220	1.40		308.00T
EMTech recommends a licensed water plant operator for any further service.				
<b>SALES TAX:</b> <i>If deducting sales tax from invoice, please include your tax exempt certificate with payment.</i>		<b>Subtotal</b> \$1,463.00		
<b>For Assistance or Questions Please Contact</b> <b>Office Phone: (518) 783-7810 Extension 113</b> <b>Service Dept. (518) 631-6004</b> <b>Fax (518) 783-2079</b>  <b>Thank you for your business!</b>		<b>Sales Tax (8.0%)</b> \$117.04		
		<b>Total</b> \$1,580.04		
		<b>Payments / Credits</b> \$0.00		
		<b>Balance Due</b> \$1,580.04		



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

6759

### FIELD REPORT

Location Name / Address <i>Bullville ARC CMI</i>	Bill To	Date <i>7/11/21</i>
Contact / Phone	EMTech Contract #	Customer PO #
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 <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	<i>Call for pumps squealing &amp; not pumping anything Found call was for domestic water. Booster pumps shut off &amp; storage tanks at approx 800 gals ea w/ well pumps not filling tanks &amp; chlorine feed pump controller plugged into a lead cable coiled up outside overhead door Tank on right has a disc on the bottom of the tank that I believe is to trigger sensors and should be floating around fill pipe. All GFI outlets went reset to operate chlorine pump except the one under catwalk that defective Sump pump is plugged into. Set Brucey to take well pump out of house</i>
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				<i>I am not sure but may require licensed water plant operator</i>	

EXPENSE TYPE (CHECK ALL THAT APPLY)					
<input type="checkbox"/> Sm Recovery Sys <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					

LABOR								
Date	Name	DDC (Tech)	MS (Mech)	MS (Chiller)	Reg	Over Time	Double Time	
<i>7/11/21</i>	<i>David Ogden</i>		<i>X</i>				<i>5 1/2</i>	

Follow-up Required? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe	Date	PO #
Customer Signature		