

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

Invoice

Date	Invoice #
12/8/2021	7254

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	WO# 14918	Due Date		12/8/2021
Description	Qty	Rate	Serviced	Amount
Completed time and material work as quoted per proposal for the Army Reserve Site at Rotterdam. Approved Via WO# 14918 Original CSS# 31085 " Replace pressure relief valves at truck bay air compressor"	1	637.00	10/15/2021	637.00T
SALES TAX: <i>If deducting sales tax from invoice, please include your tax exempt certificate with payment.</i> <i>For Assistance or Questions Please Contact</i> <i>Office Phone: (518) 783-7810 Extension 113</i> <i>Service Dept. (518) 631-6004</i> <i>Fax (518) 783-2079</i> <i>Thank you for your business!</i>		Subtotal		\$637.00
		Sales Tax (8.0%)		\$50.96
		Total		\$687.96
		Payments / Credits		\$0.00
		Balance Due		\$687.96



ENERGY MANAGEMENT TECHNOLOGIES, LLC

5 HEMLOCK STREET

LATHAM, NEW YORK 12110

518.783-7810

FAX: 518.783-2079

PROPOSAL

September 14, 2021

CMI Management
Attn: Joe Bayne

Original CSS# 31085

EMTech Initial Field Report# 6693

Site # NY059 - Rotterdam

Subject: Replace Pressure Relief Valve at Truck Bay Air Compressor

Scope of Service:

EMTech proposes to supply all labor and material needed to complete the following

- Remove the broken pressure relief valve at truck bay air compressor
- Replace with new pressure relief valve.
- Test operation

For the above work, we quote: \$637.00.....Six Hundred and Thirty Seven Dollars.

Any and all taxes are not included.

The above is broken down as follows:	\$456.00 Labor
	\$181.00 Material

Thank you for continuing to include EMTech on your energy team. As always, we look forward to working with you. Please feel free to contact for any questions or concerns you may have on this project.

Sincerely,

Jenna Caligaris
Service Coordinator

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

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

FACID/Building: Hotteladam

Date of Visit: 10/15/21

Contractor Personnel on Site:

- | | |
|-----------------------|----------|
| 1. <u>Mike Dwyall</u> | 4. _____ |
| 2. _____ | 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. _____ |
| 2. _____ |
| 3. _____ |

ATTACHMENT J-0200000-05
FORMS

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

NO# 14918

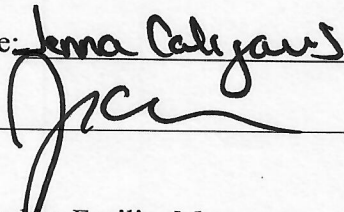
Replace Pressure Relief Valve @
Truck Bay Air Compressor
Ops. Normal

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jenna Caligaris

Date: 12/8/21

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: _____ Date: _____

Signed: _____

E-Mail: _____