

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

# Invoice

Date	Invoice #
4/1/2022	7798

## 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# 34604	Due Date		4/1/2022
Description	Qty	Rate	Serviced	Amount
Mike Duvall - Service Call at Rotterdam Location CSS# 34604 WO# 16622 Found Glycol leak at P2A circulator pump. Took apart. Put "Vic" grease on gaskets. Slowed Leak. Need new gaskets at both flanges and couplings. Need 10 gallon glycol at fill tank. Mechanical HVAC service discounted local service contract rate. Other Misc. supplies used for the service work performed on site.	3	124.00	2/24/2022	372.00T
		25.00		25.00T
<b>SALES TAX:</b> <i>If deducting sales tax from invoice, please include your tax exempt certificate with payment.</i>  <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>Subtotal</b> \$397.00		
		<b>Sales Tax (8.0%)</b> \$31.76		
		<b>Total</b> \$428.76		
		<b>Payments / Credits</b> \$0.00		
		<b>Balance Due</b> \$428.76		



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

7798

### FIELD REPORT

Location Name / Address <i>Schenectady Army</i>	Bill To	Date <i>2-24-22</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	<i>Found glycol leak @ P2A circ pump. Took apart POT "VIC" GROBE OXI GASKETS. SLOWED LEAK. NEED NEW GASKETS @ BOTH FRAMES &amp; couplings.</i>
<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
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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							
<input type="checkbox"/> Sm Recovery Sys	Date	Name	DDC (Tech)	MS (Mech)	MS (Chiller)	Reg	Over Time	Double Time
<input type="checkbox"/> Lg Recovery Sys	<i>2-24-22</i>	<i>Milo</i>		<i>X</i>		<i>3</i>		
<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? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe	Customer Signature	Date	PO #
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White - EMTech Yellow - Processing Pink - Customer

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

ATTACHMENT J-0200000-05  
FORMS

## CERTIFICATION OF WORK

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

FACID/Building: Schweitzer ArmyDate of Visit: 2-24-22

## Contractor Personnel on Site:

1. MICO
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

## Work Performed:

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

1. N/A
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## Inspection, Testing, and Certification

1. N/A
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## Other Recurring Services

1. N/A
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## Service Calls - Service Call Number and Description

1. ASS# 31604 FOR SMALL LEAK @ P2A CIRCUP
2. VIC FLANGE. NEED NEW GASKETS AT BOTH FLANGE
3. \_\_\_\_\_



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

CSS# 34604 SMALL LEAK @ P2A CIRC pump.  
NEED TO REPLACE "VIC" GASKETS & 4" coupler.

Also NEED 2 10 GALLON CRYO-TEK 100 TO FILL  
GLYCOL TANK

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name:

Mike Dull

Date:

2-24-22

Signed:

ey Dull

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:

#7798



ENERGY MANAGEMENT TECHNOLOGIES, LLC.  
FIELD QUOTE

SERVICE CONTRACT NUMBER: <u>Schoonectady Army</u>	DATE: <u>2-24-22</u>	TRACKING #
JOB NAME:	BUILDING:	
ADDRESS:	MODEL #	
CITY/STATE:	SERIAL #	
CONTACT:	SERVICE TECH:	
PHONE or © CELL:	SERVICE CONTACT #:	

DETAILED SCOPE OF WORK:

Replace frame gaskets & cap nut gaskets  
AT CIRC pump 2A, fill Glycol TANK ABOVE LOW  
Level ALARM SWITCH.

#7798 follow up / CCS # 341604

Time & Material pricing, in accordance with	Estimated Hours <u>8</u>	X	\$ <u>120.00</u>	(\$ <u>960.00</u> )
above specifications:	Estimated Material			(\$ <u>962.66</u> )
			Total	(\$ <u>1922.66</u> )

WE PROPOSE hereby to furnish a **quoted price** for material and labor, in accordance with  
above specifications, for the sum of: Dollars (\$ 1922.66)

All quotations are subject to applicable state and local taxes at the time the work is completed. Taxes, mileage and shipping & Handling IS NOT included in this quotation. This proposal may be withdrawn by us if not accepted within thirty (60) days of quoted date.

Field Technician Signature: [Signature] Date: 2-24-22

ACCEPTANCE OF PROPOSAL-The above prices, specifications and conditions are satisfactory and hereby accepted.  
EMTech is authorized to perform the work as specified. We understand payment terms are Net 30  
from invoice date.

Authorized Signature: \_\_\_\_\_ Date Accepted:   /  /  

Print Name: \_\_\_\_\_

Purchase Order (if required): \_\_\_\_\_ Attachment C, P 1