

Additional Funding Request

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|--|---|
| Site: NY023 | WO# 5655 CSS # 21382 Asset# NA |
| Description of Repairs | Repair Roof Leak Building 200 |
| Diagnosis: Initial Work Order CSS# 21382 | Roof Leak Building 200 |
| Explanation of Additional Costs for Repairs | Labor and material to temp stop the leak |
| Additional Labor Cost to Perform Repairs | 6 x \$190 = \$1140.00 |
| Additional Material Cost to Perform Repairs | \$350.00 |
| Total Cost of Repair | \$1490.00 |
| | |
| | |

September 17, 2019



| Bill To | | Ship To | |
|---------------|---|-----------------|--|
| Customer | International Support Group J Merchant, M Merchan | Recipient | 99 RSC DPW R Linn |
| Customer ID# | NY023 | Address | Ernie Pyle USARC BLDG 206 Ft Totten NY |
| Address | 9050 Pines Blvd STE 150 Pembroke Pines FL 33024 | Phone | 718 631 6188 |
| Phone | 718 790 3562 | | |
| Payment Due | NET 30 | Delivery Date | September 25, 2019 |
| Salesperson | JW | Shipping Method | N/A |
| Payment Terms | CC | Shipping Terms | N/A |

| Qty. | Item# | Description | Unit Price | Line Total |
|------|-------|---|------------|---|
| 1 | 1 | <p>Building 200 Ft Totten</p> <p>Room 3009B Possible Roof Leak</p> <p>Inspected Roof and Ceiling possible Roof failure is causing water to gather under the foam insulation on the rubber roof, Roof might need replacement.</p> <p>Recommend trying to temporally stop the leaks by applying a rubber waterproofing material too the areas in question inside the upper ceiling. Replace damaged ceiling tile.</p> <p>Material</p> <p>Labor 6 hrs x \$190.00</p> <p>TOTAL</p> | | <p>\$350.00</p> <p>\$1140.00</p> <p>\$1490.00</p> |

11 Snug Cove Lane
Bayville NY 11709
Jacka377@verizon.net
516 941 6581

CERTIFICATION OF WORK

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

FACID/Building: NY623 Bldg 200 Date of Visit: 9/17/19

Contractor Personnel on Site:

1. Sammy 2. _____

Work Performed: Room 3009B CSS# 2152

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders -

| Asset # | Qty | Asset Description |
|---------|-----|---------------------------|
| | | Room 3009B |
| | | Possible roof leak |
| | | Window Frame |
| | | NO visible Pipes Leaking |
| | | Seal Frame and other Area |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Twana Date: 9/17/19

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: LOUIS CORBO Date: _____

Signed: [Signature]

E-Mail: LOUIS-A-CORBO-CTR@MAIL.MIL

CSG # 21382

Room 3009 B



CSS# 21382 Room 3609B

