

United Air Conditioning, Refrigeration, Plumbing &
Heating, Inc.
201 Ann Street #1
Newburgh, NY 12550
Phone 845-561-5030 Fax 845-561-0038

Invoice

DATE	INVOICE #
8/5/2020	424632

BILL TO
CMI Management, Inc. 5285 Shawnee Rd Suite 510 Alexandria, VA 22312 Attn: Steven Miller

JOB SITE
New York Army National Guard Recruiting 910 Raz Avenue New Windsor, NY 12553

P.O. NO.	TERMS	DUE DATE	REP	PROJECT	W.O. NO
9745	Net 30	9/4/2020		New York Ar...	
ITEM	DESCRIPTION	QTY	RATE	AMOUNT	
Labor	Date of Service - 7-27-20 - CSS# 26324	2.25	161.00	362.25	
Material	Air Handler #4 Leaking - Please see attached Service Order for more details.	1	60.00	60.00	
Thank you for your business.				Subtotal	\$422.25
				Sales Tax (0.00)	\$0.00
				Total	\$422.25
				Payments/Credits	\$0.00
				Balance Due	\$422.25

**UNITED A/C, REFRIGERATION
PLUMBING & HEATING, INC.**

201 ANN ST #1
NEWBURGH, NY 12550

(845) 561-5030
Fax (845) 561-0038

CSSNY116

**HVAC SERVICE ORDER
INVOICE**

424632

BILL TO

THIS WORK IS TO BE	
<input type="checkbox"/> C.O.D.	<input type="checkbox"/> CHARGE
<input type="checkbox"/> NO CHARGE	
MAKE Trane	MAKE
MODEL MCCB025UADCOUB	MODEL
SERIAL NUMBER K08680444	SERIAL NUMBER

NAME New York Army Nation Guard Recptn	
STREET 910 Raz Ave	DATE 7/27/20
CITY New Windsor NY	PROMISE
PHONE	CALL BEFORE <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
TECHNICIAN Rich	AUTHORIZED BY
WORK TO BE PERFORMED Leak in A.R Handler	
P.O. # W/O #9745	

ENVIRONMENTAL CHECK LIST			RECOMMENDATIONS
WORK PERFORMED	QTY.	TYPE/DISPOSITION	
<input type="checkbox"/> RECOVERED			Follow up with Jim to find out why insulation was cut away and determine if pipes were leaking.
<input type="checkbox"/> RECYCLED			
<input type="checkbox"/> RECLAIMED			
<input type="checkbox"/> RETURNED			
<input type="checkbox"/> DISPOSAL			
<input type="checkbox"/> DISMANTLED <input type="checkbox"/> CHANGED OUT/REPLACED		TOTAL \$	

QTY.	MATERIALS & SERVICES	UNIT PRICE	AMOUNT
4	REFRIGERANT R- CO2 Cartridge	15.00	60.00
	FILTERS	X	X
	FILTERS	X	X
	BELTS		

TOTAL MATERIALS			60.00
HRS.	LABOR	RATE	AMOUNT
2	Rich Travel	2.25	161.00

Began by shutting unit off. Opened doors and found pans filled with water. Blew at drain lines and pans with drain began to drain the water. Found uninsulated pipes over top of unit dripping water on to unit and water dripped into seals between sections. Filling other pans and areas within the air handler. Pipes above could have a small leak or just excess sweating. Jim will find out why pipes were uninsulated.

Work Order #9745

TERMS

All sums due hereunder, if not paid within THIRTY (30) days of the above date, shall bear interest at the rate of 1.5% per month. In the event litigation is commenced to collect any sums due hereunder, the prevailing party in such litigation shall be entitled to an award of reasonable attorney's fee.

I have authority to order the work outlined above which has been satisfactorily completed. I agree that Seller retains title to equipment/materials furnished until final payment is made. If payment is not made as agreed, Seller can remove said equipment/materials at Seller's expense. Any damage resulting from said removal shall not be the responsibility of Seller.

Ramus P. Monach 27 July 2020

CUSTOMER SIGNATURE DATE

LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.		TOTAL SUMMARY	
<input type="checkbox"/> REGULAR	<input type="checkbox"/> WARRANTY	TOTAL MATERIALS	60.00
<input type="checkbox"/> SERVICE CONTRACT		TOTAL LABOR	362.25
		TAX	
Thank You		TOTAL	

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

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

FACID/Building: N1116 Date of Visit: 7/27/20

Contractor Personnel on Site:

- | | |
|------------------------|----------|
| 1. <u>Rich Alfieri</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

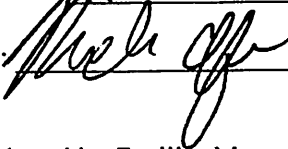
1. 9745. Water leaking out of unit and pans inside full of water
2. _____
3. _____

ATTACHMENT J-0200000-05
FORMS

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

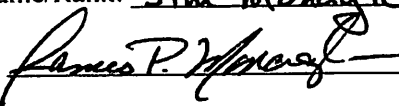
CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Rich Alfieri Date: 7/27/20
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: Jim Monagle, Contractor Date: 27 July 2020
Signed: 
E-Mail: james.p.monagle.ctr@mail.mil