

AMI Services, Inc.
168 Hopper Avenue
Waldwick, NJ 07463
201 447-6750



Work Order Invoice 48635

Date: 07/29/22

Bill to: CMI Management, Inc. 5285 Shawnee Road Suite 510 Alexandria, VA 22312	Job Address: SGT Catalin D Dima AFRC 910 Raz Avenue New Windsor NY 12553
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Customer Code	Payment Terms	Customer PO Number	Quote	Type	Page
19098	Net 30	Wo 17650, css 501	4,995.00	F	1
Remarks: SGT Catalin D Dima AFRC WO# 59645					

Description of Work Completed

Provided the necessary labor, material, equipment and supervision required to replace AH3T motor as specified on our service proposal dated May 14th, 2022.

Other Costs

Description	Extension
Contract Billing	4,995.00
Subtotal:	4,995.00
Sales Tax:	405.84
Invoice Total:	5,400.84



May 14, 2022

SGT Catalina D Dima AFRC
910 Raz Ave
New Windsor, NY 12553

Re: AH3T motor

Dear Joe,

Thank you for the opportunity to quote.

We propose to furnish the necessary labor, material, and supervision required to replace the motor found defective on service call 5/14/22.

Our proposal is based on the following:

1. Remove existing defective motor.
2. Install new motor.
3. Align motor sheaves.
4. Verify drive operation.

Our proposal excludes the following:

1. Parts or materials not herein listed.
2. Labor to replace parts or materials not here in listed.
3. Permits or fees.

The above can be completed for the sum of \$4,995.00 plus any applicable taxes.

Labor 12 X \$150=	\$1,800.00
Trip.	\$100.00
Motor \$2085.00 X 20%	\$2,502.00
Miscellaneous.	\$343.00
Shipping.	\$250.00

Please sign where indicated, confirming your acceptance of the above listed work. Kindly fax the signed acceptance to our office, including your Purchase Order Number.

If you should have any questions or require additional information on the above, please do not hesitate to contact us.

Authorized Signature: _____ Date: _____

Purchase order: _____

Yours Truly,
David Hinnrichs

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: NY116 Date of Visit: 7/13/22

Contractor Personnel on Site:

1. <u>Ken Patrick</u>	<u>Armistead.</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. Replace blower motor in AH3T. Check drive operation. Unit running no faults.
2. _____
3. _____

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

CSS#501 WO#17650 NY116 New Windsor

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ken Patrick Date: 7/13/22

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: _____ 7/13/22

Signed:

E-Mail: