



## Mechanical HVAC Service Contractors

## mechanical HVAC Service Contract

**Phone: (518) 326-8450 • Fax: (518) 326-8435  
P.O. Box 311, 95 Hudson River Road  
Waterford, New York 12188**

Job # 18616

UNIT	MAKE	MODEL	SERIAL #	VOLTS	ENVIRONMENTAL CHECK LIST		
NAME	Rotterdam Army Reserve				<input type="checkbox"/> CONDENSING UNIT	QTY.	TYPE/DISPOSITION
STREET			DATE	7-7-22	<input type="checkbox"/> RECOVERED		
CITY					<input type="checkbox"/> RECYCLED		
TECHNICIAN	CS5#855 W# 17652				<input type="checkbox"/> RECLAIMED		
DESCRIPTION OF WORK PERFORMED					<input type="checkbox"/> RETURNED		
					<input type="checkbox"/> DISPOSAL		

COOLING OUT     HEATING OUT     LEAK     WARRANTY     INSTALLATION

NOT ABLE TO MAKE "HOTWATER ISSUE INTO TOILETS ACCURE AGAIN." THE FIX WILL BE TO PUT A CHECKVALVE AT EACH SUPPLY LINE TO TOILETS & SINKS & URINALS. WILL QUOTE FIX.

## RECOMMENDATIONS

## TOTAL MATERIALS

## TOTAL LABOR

**CUSTOMER SIGNATURE**

DATE

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

FACID/Building: NY059 Date of Visit: 7-7-22

Contractor Personnel on Site:

1. M.Ko
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. CSS#855 CWT#17652 NOT ABLE TO RECREATE
2. HOT WATER IN TOILET ISSUE, PROPOSED FIX IS TO INSTALL A
3. CHECK VALVE IN EA COLDWATER SUPPLY LINE,

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

CSS# 855 w/ D652 not able to RECREATE  
HOTWATER IN TOILET ISSUE, proposed fix is to install a  
check valve in each cold water supply line.

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**CERTIFICATION OF WORK**

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To be signed by the Contractor:

Print Name: Mike Dull Date: 7-7-22  
Signed: Mike 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: Mike Moseman Date: 7/7/2022  
Signed: Mike Moseman  
E-Mail: Michael.Moseman.civ@wmp.mil