

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



Work Order Invoice 48850

Date: 08/31/22

Bill to: CMI Management, Inc. 5285 Shawnee Road Suite 510 Alexandria, VA 22312	Job Address: SSG Frederick J III Jr USARC 2500 NY Route 17K Bullville NY 10915
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Customer Code	Payment Terms	Customer PO Number	Quote	Type	Page
19098	Net 30	CSS1075-WO 18725	1,120.00	F	1

Remarks:	SSG Frederick J III Jr USARC WO# 60482
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Description of Work Completed

Provided the necessary labor, material, equipment and supervision required to perform OMS wash bay water pump/filter repairs as specified on our service proposal dated August 12th, 2022.

Other Costs

Description	Extension
Contract Billing	1,120.00

Subtotal: 1,120.00

Sales Tax: 91.00

Invoice Total: 1,211.00

August 12, 2022

Frederick J III USARC
Route 17k
Bullville, NY

Re: OMS wash bay water pump/filter repairs.

Dear Joe,

Thank you for the opportunity to quote.

We propose to furnish the necessary labor, material, and supervision required to replace frozen and broken water piping to wash bay pump/filter system.

Our proposal is based on the following:

1. Replace frozen and broken water piping to pump/filter system.

Our proposal excludes the following:

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

Note: It is our recommendation to add additional heat to wash bay, existing is insufficient for space. Or shutdown water and winterize.

The above can be completed for the sum of \$1,120.00 plus any applicable taxes.

Labor 4 X \$150= \$600.00

Trip. \$50.00

Material. \$470.00

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: Joe Bayne Date: 8/18

Purchase order: _____

Yours Truly,
David Hinnrichs

CERTIFICATION OF WORK

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

FACID/Building: Bullville Date of Visit: 8/23/22

Contractor Personnel on Site:

- | | |
|-----------------------|----------|
| 1. <u>Jim Johnson</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. 60482 - wash bay repairs
2. _____
3. _____

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

Repairs to wash station filter system. Fix water
piping to unit. Could not turn water on at
theCurb valve seems to not want to open will
need to look into this more

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Nick domoe Date: 8/23/22

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: _____

Signed: 

E-Mail: _____