

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



Work Order Invoice 49407

Date: 10/31/22

Bill to:	Job Address:
CMI Management, Inc. 5285 Shawnee Road Suite 510 Alexandria, VA 22312	SSG Frederick J III Jr USARC 2500 NY Route 17K Bullville NY 10915

Customer Code	Payment Terms	Customer PO Number	Quote	Type	Page
19098	Net 30	WO 19386 // CSS 90202		T	1
Remarks: SSG Frederick J III Jr USARC WO# 61055					

Description of Work Completed

Provided the necessary labor, material, equipment and supervision required to check the compressor in OMS mechanical will not hold pressure, moisture relief valve kicking in at about 50psi and will not hold any additional pressure as specified on our work order report dated October 11th.

Labor & Equipment Used

Week ending 10/15/22	Sun 10/9	Mon 10/10	Tues 10/11	Wed 10/12	Thur 10/13	Fri 10/14	Sat 10/15	Total Hours	Rate	Extension
R-Cody R. Berlt			3.50					3.50	155.00	542.50

Other Costs

		Description	Extension
Trip Charge			75.00

Invoice Totals:	Labor	Material	Other	Subtotal:	617.50
	542.50	0.00	75.00	Sales Tax:	50.17

Invoice Total: **667.67**



Work Order
No: 61055

Armistead Mechanical Inc. Services
168 Hopper Avenue, Waldwick NJ 07463

Date: 10/11/2022

Status: Schedule

Service To: SSG Frederick J III Jr USARC Address: 2500 NY Route 17K Bullville NY 10915	Contact: Phone:
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Work Summary

Compressor in OMS mechanical will not hold pressure. Moisture relief valve kicking in at about 50psi and will not hold any additional pressure

Equipment

ID	Description	Type	Make	Model	Serial Number	Location	Year Installed

Labor

Date	Technician	Hours
10/11/2022	20073 (Cody R. Berlt)	3.50

Parts

Description	Quantity

Notes

Topic	Note
WORK ORDER NOTES	10/11/22 CB EA No manual on site for unit Downloaded manual CleanedAir dryer filter Tested solenoid Checked circuit charge Checked compressor Needs board ordered info give to Dave H Unit left off due to issue

Customer Signature		Signed By		Date	
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CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: NY Bullville Date of Visit: 10/11/2022

Contractor Personnel on Site:

	Armistead.
1. <u>Cody Berlt</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. _____ OMS shop. Air compressor drier blooming down. Download manual.
2. _____ Cleaned air drier filter. Tested solenoid. Checked charge. Needs new board. Must quote v
3. _____

**ATTACHMENT J-0200000-05
FORMS**

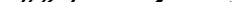
Over and Above Repair Work – Order Number and Description of Work Completed

CSS#90202. WO#19386. NY. Frederick J III Bullville.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Cody Berlt Date: 10/11/2022

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: 10/11/2022

Signed:

E-Mail: