

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



Work Order Invoice 50574

Date: 02/28/23

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
--	--

Customer Code	Payment Terms	Customer PO Number	Quote	Type	Page
19098	Net 30	WO 19757 CSS 90549	945.86	F	1
Remarks: SGT Catalin D Dima AFRC WO# 62377					

Description of Work Completed

Provided the necessary labor, material, equipment and supervision required to AMSA replace intake proving switch after removing bees and verifying all intake piping is clear as specified on our service proposal dated February 6th, 2023.

Other Costs

Description	Extension
Contract Billing	945.86

Subtotal: 945.86

Sales Tax: 76.85

Invoice Total: 1,022.71

February 6, 2023

NY116 SGT Catalin D Dima AFRC
910 Raz Ave
New Windsor, NY 12553

Re: WO 19757 CSS 90549 AMSA Intake switch

Dear Joe,

Thank you for the opportunity to quote.

We propose to furnish the necessary labor, material, and supervision required to replace intake proving switch after removing bees and verifying all intake piping is clear.

Our proposal is based on the following:

1. Replace intake switch.
2. Test and inspect.

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 \$945.86 plus any applicable taxes.
Quote valid for thirty days.

Labor 4 X \$150=.	\$600.00
Trip.	\$75.00
Material \$225.72 X 1.2=.	\$270.86

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: 2/10/23

Purchase order: _____

Yours Truly,
David Hinnrichs

CERTIFICATION OF WORK

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

FACID/Building: NY116 New Windsor Date of Visit: 2/22/23
AMSA shop

Contractor Personnel on Site:

- | | | |
|----------------------|-------------------|----------|
| 1. <u>Cody Berlt</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. _____ Picked up needed part from shop
2. _____ Installed new air proving / blocked Intake switch
3. _____ Ran unit through several heating cycles (no trips)
4. _____ Checked operation

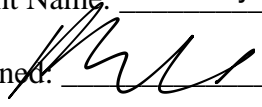
Over and Above Repair Work – Order Number and Description of Work Completed

WO#19757 CSS#90549
NY116 SGT Dima AFRC

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Cody Berlt Date: 2/22/23

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: _____