

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



## Work Order Invoice 50824

Date: 04/10/23

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	CSS# 92737 // WO#21743		T	1
Remarks: SSG Frederick J III Jr USARC WO# 62668					

### Description of Work Completed

Provided the necessary labor, material, equipment and supervision required to check HWP-3-0 is leaking as specified on our work order report dated March 21st.

### Labor & Equipment Used

Week ending 03/25/23	Sun 3/19	Mon 3/20	Tues 3/21	Wed 3/22	Thur 3/23	Fri 3/24	Sat 3/25	Total Hours	Rate	Extension
R-Ryan R. Haight				1.00				1.00	155.00	155.00

### Other Costs

		Description	Extension
Trip Charge			75.00

Invoice Totals:	Labor	Material	Other	Subtotal:	230.00
	155.00	0.00	75.00	Sales Tax:	18.69

Invoice Total: **248.69**



Work Order  
No: 62668

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

Date: 3/22/2023

Status: Schedule

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

As per Vanessa, HWP-3-0 is leaking

#### Equipment

ID	Description	Type	Make	Model	Serial Number	Location	Year Installed

#### Labor

Date	Technician	Hours
3/21/2023	20056 (Ryan R. Haight)	1.00

#### Parts

Description	Quantity

#### Notes

Topic	Note
WORK ORDER NOTES	3/21/23 RH- arrived on site checked in with customer. Went back to shop building. Went to boiler room hwp 3-0 looked like it was leaking at one time. A bunch of dry glycol all over pump. Turned disconnect to vfd drive off. Took pictures of info and sent to Dave h to quote repairs

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: NY011 Bullville Date of Visit: 3/21/23

Contractor Personnel on Site:

1. <u>Ryan Haight</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. \_\_\_\_\_ arrived on site checked in with customer. Went back to shop building.  
~~Went to boiler room hwp 3-0 looked like it was leaking at one time. A bunch of dry glycol all over pump. Turned disconnect to vfd drive off.~~
2. \_\_\_\_\_
3. \_\_\_\_\_ Took pictures of info and sent to Dave h to quote repairs

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

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WO#21743. CSS 92737

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NY011 Bullville

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Ryan Haight Date: 3/21/23

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: \_\_\_\_\_