

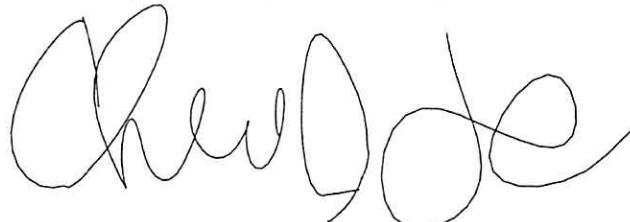
Service Items					
Name	Description	Tier 1 Price	Unit Type	QTY	Taxable
Labor	See attached pages for details of work performed.	\$0.00	Hour	1	N
TOTAL*:	\$0.00				
* Not including taxes					

Service Forms	
Daily Form	Fill out every day, even on PMs, and projects
TECH NAME	Stephen Shipman
DATE	3-20-24
POINT OF CONTACT:	Reginald Cook
DESCRIPTION OF WORK PERFORMED	Gained access to the boiler room and got a scope of work needed to make repairs to floor drain. Cleaned up my working area and checked out with on-site personnel before departing site obtaining a signature v
TOOLS USED	Tape measure
MATERIALS USED OR PICTURE OF TAG*	N/A
HOURS	REGULAR:
	OVERTIME:

Customer Signature

Customer Signature Chris.png

Signature is acceptance of Service provided



03/20/2024 12:32 PM

Attachments	
 RazorSync	Rs Form 100001

Service Items

Name	Description	Tier 1 Price	Unit Type	QTY	Taxable
Labor	WO15221 CSS93144 PA063 Floor Drain- Per Quote 24-204S- Contract Price	\$8,148.00	Hour	1	N
TOTAL*:	\$8,148.00				

* Not including taxes

Service Forms

Daily Form Fill out every day, even on PMs, and projects

TECH NAME Jesse Miller
DATE 6/17/24
POINT OF CONTACT:
DESCRIPTION OF WORK PERFORMED Demo old floor drain and concrete surrounding it. Replace with new floor drain and repair concrete.
TOOLS USED N/A
MATERIALS USED OR PICTURE OF TAG* Floor Drain
Bags of Concrete
No Hub Bonds
Sch 40 PVC pipe
HOURS REGULAR:
OVERTIME:

Attachments

Title	File Name
PDF Invoice 51621-INV	Invoice 51621-INV.pdf
PDF Invoice 51621	Invoice 51621.pdf

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

FACID/Building: New Castle Date of Visit: 6-17-24

Contractor Personnel on Site:

Renick Brothers
1. Jesse Miller 2. Nolan Renick

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. _____

Service Calls – Service Call Number and Description

1. CSS# 93144 *Replace Floor Drain*
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jesse Miller Date: 6-17-24

Signed: Jesse Miller

To be signed by Facility Manager:

By signing the Certification of Work, 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.
This is NOT a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: William Copley 69-10 Date: 2024-06-17

Signed: W. Copley

E-Mail: _____