



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 N/A

PICTURE OF TAG*

HOURS REGULAR:

OVERTIME:

Customer Signature

Customer Signature

Chris.png

Signature is acceptance of Service provided

03/20/2024 12:32 PM



Attachments



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 Esq. 10 Date: 20240617

Signed: [Signature]

E-Mail: _____