



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 Jake Deep

DATE 6/23/25

POINT OF CONTACT: Reginald

DESCRIPTION OF WORK PERFORMED upon arrival, I flushed both tankless hot water heaters and the tanked hwh in the motorpull. checked over the operation of all three. each one has failed expansion tanks. both tankless hwh's could use new flame sensors/igniters. I left the left one off due to the poor condition the gasket was in. Reginald said he'd like a quote for these repairs.

TOOLS USED handtools
tankless hwh flush kit

MATERIALS USED OR 1 gallon of vinegar

PICTURE OF TAG*

HOURS REGULAR:

OVERTIME:



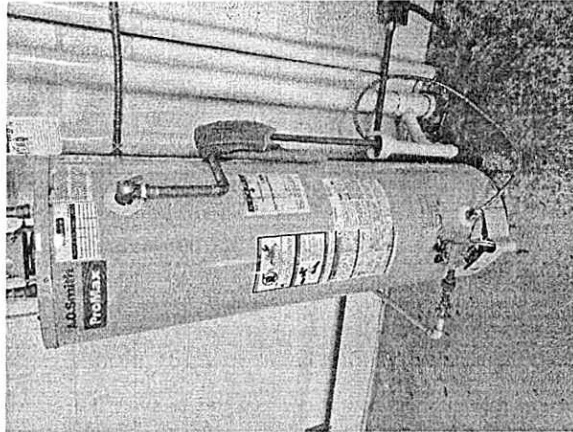
Attachments

Title

File Name

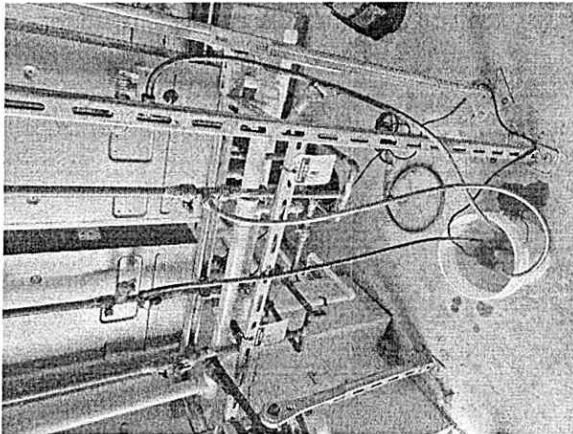
1000004065 06/23/2025
09:47 AM

55f30916-ab00-42d5-aa24-4b50bd6e0df9.jpg



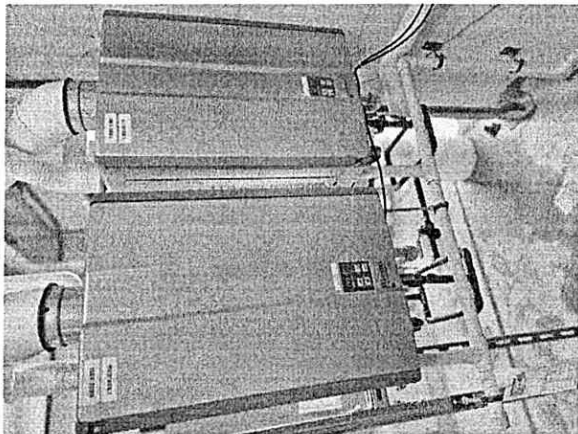
1000004060 06/23/2025
09:47 AM

a0736220-c830-496c-a19d-a1a5adb94d6c.jpg



1000004067 06/23/2025
09:47 AM

b5b6d9ca-a112-465f-886b-6029906eebca.jpg



CERTIFICATION OF WORK

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

FACID/Building: PA062 Date of Visit: 6/23/25

Contractor Personnel on Site:

1. Jacob Deep 2.

Work Performed:

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

Deep Clean DHWH's @ Meadville

1.

Service Calls – Service Call Number and Description

1. CSS# WO#18487 FEMS3113798 PO-0001538
2. CSS#
3. CSS#

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jacob Deep Date: 6/23/25

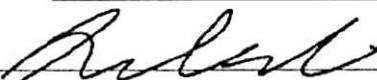
Signed: Jacob Deep

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: Date:

Signed: 

E-Mail: scott.w.kawski.civ@army.mil