

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 Tom Timlin

DATE 4/1/24

POINT OF CONTACT: Reginald

DESCRIPTION OF WORK PERFORMED Installed the new propane valve on B-2. It was valve #2. Installed it and tested the combustion on the new valve. Had to adjust the low fire side of it and it was good then. Tried adjusting the high fire but could not get it to set where it should be due to the gas pressures. I recommend getting gas regulators Installed on both boiler, per manufacturer installations instructions. Unit is running good at this time.

TOOLS USED hand tools

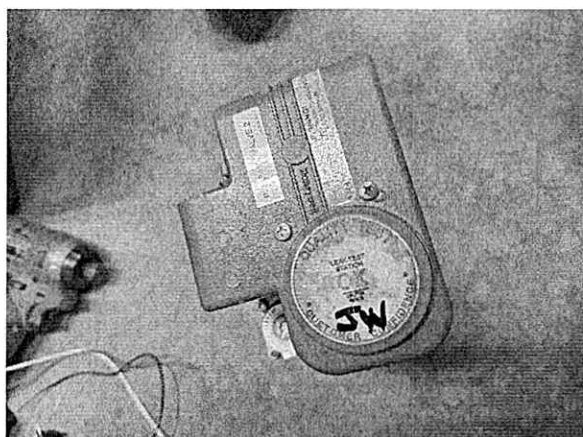
MATERIALS USED OR PICTURE OF TAG* 1: lochinvar propane valve. (ordered)

HOURS REGULAR:

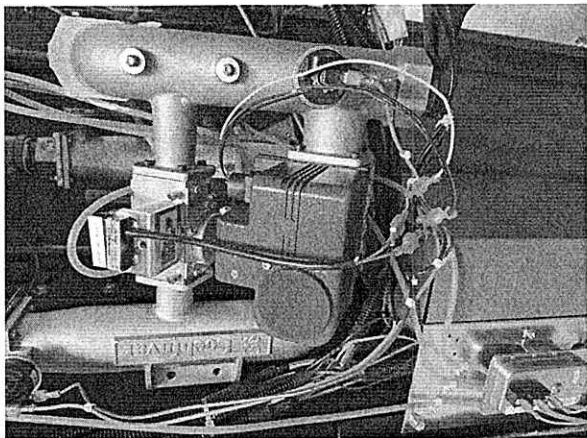
 OVERTIME:

Attachments

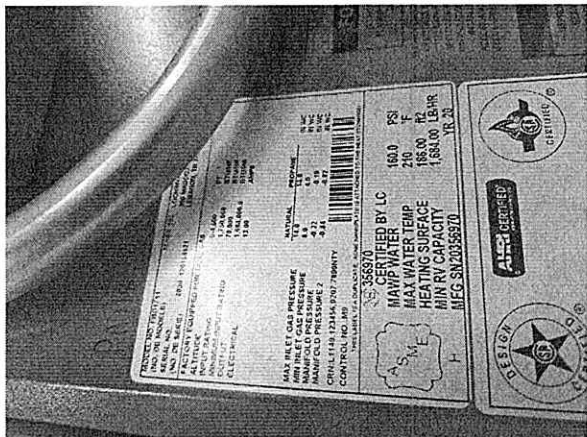
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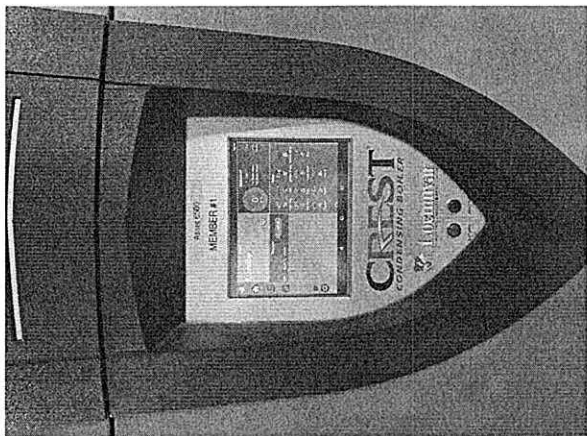
1000003579 04/01/2024 10:20 AM cd7f6bc9-137a-477c-9149-7584e616a1e1.jpg



1000003580 04/01/2024 10:20 AM c3241654-ff05-4860-8250-a58850b8fa54.jpg



1000003581 04/01/2024 10:20 AM 91bcac23-ec5d-47e9-aace-0c9580c86581.jpg



CERTIFICATION OF WORK

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

FACID/Building: PA118 Date of Visit: 4/1/24

Contractor Personnel on Site:

1. Tom Timlin
2. Ethan McIroy

Work Performed:

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

1. _____

Service Calls – Service Call Number and Description

1. CSS# 96158. Install new Propane Valve #2 on B-2
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Thomas Timlin Date: 4/1/24

Signed: 

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: Cynthia Croyle/ AFOS Date: 4/1/24

Signed: 

E-Mail: cynthia.a.croyle.ctr@army.mil