

Date: 4/7/2025

Region: 4A
FAC ID: NY065

FEMS No.: 3113784
Maximo WO No.: 18494

Asset #: NA

Priority: Routine



Original Work Request:

Perform annual backflow device testing and inspection on back flow device located in room 108. Provide inspection tag and report to local water authority. Backflow device due in May 8 2025.

Description of Repairs Needed:

Labor and material to a.) perform backflow testing on Watts 2" 909M1QT, provide tag and report to water authority.

Labor	Labor Hrs	Labor Rate	Total
Technician	3	\$ 100.00	\$ 300.00
		\$ -	\$ -

Material List:	Quantity	Cost	Total
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -

Equipment List:	Quantity	Cost	Total
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -

PM WO History:

NA

Estimate Summary:

Labor	Material	Equipment
\$300.00	\$0.00	\$0.00

Sub Total	G&A 12%	Fee 6%	Total Estimate
\$300.00	--	--	\$300.00

Note: G&A and Fee are not applied on top of work performed by Tidewater.



Prepared by:

Tidewater, Inc.
6625 Selkirk Drive, Suite A
Elkridge, MD 21075

Prepared for:

CMI Management, Inc.
5285 Shawnee Road Suite 510
Alexandria, VA 22312-2334

Date: 4/7/2025
FAC ID: NY065

FEMS #: 3113784
WO #: 18494

DESCRIPTION OF WORK			
Labor and material to a.) perform backflow testing on Watts 2" 909M1QT, provide tag and report to water authority.			

LABOR	QTY	UNIT/RATE	TOTAL
Technician	3	\$100.00	\$300.00
		\$0.00	\$0.00
MATERIAL	QTY	UNIT/RATE	TOTAL
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
EQUIPMENT	QTY	UNIT/RATE	TOTAL
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
SUB-TOTAL COSTS:	LABOR TOTAL		\$300.00
	MATERIAL TOTAL		\$0.00
	EQUIPMENT TOTAL		\$0.00
TOTAL COST:			\$300.00

Accepted By: _____

Date: _____

