

HS HYDE-STONE

MECHANICAL CONTRACTORS

DESIGN • INSTALL • SERVICE

SINCE 1893

BILL TO	Mail Remittance to:
CMI MANAGEMENT PM / 99TH - REGION 2 5285 SHAWNEE ROAD ALEXANDRIA VA 22312	Hyde-Stone Mechanical Contractors, Inc. 22962 Murrock Circle Watertown, NY, 13601 TF: 1-866-401-9053
JOB LOCATION	
US ARMY RESERVE- CMI- SITE #NY 5363 PERU STREET PLATTSBURGH NY 315-772-6996	Invoice Number : W10499 Invoice Date : Sep 30/20 Customer Code : USARMY054 Terms : 30 Customer PO : Work Order # : 20-0001492

Description	Qty	Price	Total
Work Performed Scheduled 8 am thurs - ny054 Plattsburg, toilet plugged ladies room - PER Joe at cmi No one at location WORK NOT COMPLETE - NEED TO RETURN PREVAILING WAGE LOCATION Used a toilet snake to clear drain. Once drain was cleared and debris was gone. I verified toilet operation. Toilet is ok. W.o. Complete			
Materials Total Materials			0.00
Labor Total Labor			165.00
Travel Total Travel			50.00
Other Total Other			0.00

Subtotal	215.00
Sales Tax	
Total Invoice	215.00

Thank You for your business.
If you have any questions, please call Tammy Parisian
Direct: 315-755-2278 Office: 315-788-1300 (x231)
tparisian@hyde-stone.com

CERTIFICATION OF WORK

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

FACID/Building: _____

Date of Visit: **9/27/20**

Contractor Personnel on Site:

1. **HANSON**
2. _____
3. _____

4. _____
5. _____
6. _____

Work Performed:

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

1. _____
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. _____
2. _____
3. _____
4. _____

Other Recurring Services

1. **Plugged Toilet**
2. _____
3. _____
4. _____

Service Calls - Service Call Number and Description

1. _____
2. _____
3. _____

ATTACHMENT J-0200000-05
FORMS

Over and Above Repair Work – Order Number and Description of Work Completed

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jeff Lamoureux Date: 9/24/20

Signed: Jeff Lamoureux (TP)

To be signed by Facility Manager:

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:

Print Name/Rank: _____ Date: _____

Signed: _____

E-Mail: _____