

Additional Funding Request

Site: NY058	CSS # 24049 WO-2-7342
Description of Repairs	Dispose and replace 30 Gallons of NU-CALGON PROPYLENE BLUE GLYCOL
Diagnosis: Initial Work Order CSS# 22386	ISG PM technician found defective Glycol, Glycol needs to be replaced asap.
Explanation of Additional Costs for Repairs	
Additional Labor Cost to Perform Repairs	3 hr x \$183.33 = \$550.00
Additional Material Cost to Perform Repairs	Six (6) 5 Gal containers of NU-CALGON PROPYLENE BLUE GLYCOL @ 308.40 each. Total material cost 1850.40
Total Cost of Repair	\$2400.40
Notes:	

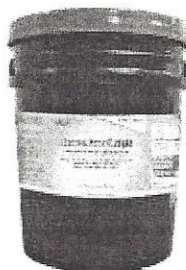
11 Snug Cove Lane
Bayville NY 11709
Jacka377@verizon.net
516 941 6581

Temp. Range
-60 Degrees to
230 Degrees F

Color
Blue

Application
Freeze Point
Suppressant

[View product details](#)



NU-CALGON

5 gal. Blue
Propylene Glycol,
Temp. Range
-76° to 360°F

[VIEW](#)



NU-CALGON

1 gal. Blue
Propylene Glycol,
Temp. Range
-60° to 230°F

[VIEW](#)

Web Price ⓘ

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

Contractor Personnel on Site:

1. Twelve 2. _____

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders - 28, 34, 40, 46, 52, 58, 64, 70, 76, 82, 88, 94, 100, 106, 112, 118, 124, 130, 136, 142, 148, 154, 160, 166, 172, 178, 184, 190, 196, 202, 208, 214, 220, 226, 232, 238, 244, 250, 256, 262, 268, 274, 280, 286, 292, 298, 304, 310, 316, 322, 328, 334, 340, 346, 352, 358, 364, 370, 376, 382, 388, 394, 400, 406, 412, 418, 424, 430, 436, 442, 448, 454, 460, 466, 472, 478, 484, 490, 496, 502, 508, 514, 520, 526, 532, 538, 544, 550, 556, 562, 568, 574, 580, 586, 592, 598, 604, 610, 616, 622, 628, 634, 640, 646, 652, 658, 664, 670, 676, 682, 688, 694, 700, 706, 712, 718, 724, 730, 736, 742, 748, 754, 760, 766, 772, 778, 784, 790, 796, 802, 808, 814, 820, 826, 832, 838, 844, 850, 856, 862, 868, 874, 880, 886, 892, 898, 904, 910, 916, 922, 928, 934, 940, 946, 952, 958, 964, 970, 976, 982, 988, 994, 1000

Service Orders - *CSS 24049 WO 7342*

[illegible]


To be signed by the Contractor:

Signed: _____

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: Robert Bennett Date: Feb 17, 2020

Signed: 

E-Mail: _____