

CERTIFICATION OF WORK

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

FACID/Building: WV046 Date of Visit: 2/6/2025

Contractor Personnel on Site:

1. Jordan Koblentz 2. _____

Work Performed:

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

1. WO# 216819 Maximo WO# 17679

Service Calls – Service Call Number and Description

1. CSS# FEMS 2934939
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jordan Koblentz Date: 2/6/2025

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: Michael Dye Date: 2/6/2025

Signed: 

E-Mail: _____

CASTO TECHNICAL SERVICES, INC.

SERVICE REPORT

DATE 2025 2 6 ARRIVAL TIME 8:00AM DEPARTURE TIME _____ JOB/TCK. NO. 216819CUSTOMER P.O. NO. WV046 2934939 WO1767JOB NAME/LOCATION USARC - Parkersburg WV046SERVICE REQUESTED (3.5) Investment is to replace the Pressure Transducer on the Glycol Feeder System in the Boiler Maintenance

| | | | | |
|----------------------|-----|----|----|------|
| Manufacture: _____ | | | | |
| Model#: _____ | | | | |
| Serial#: _____ | | | | |
| Refrigerant Added: | Qty | lb | oz | TYPE |
| Refrigerant Removed: | Qty | lb | oz | TYPE |

☐ Leak Tested

☐ Leak Found

☐ Leak Repaired

Method: _____

Total Charge: _____

WORK PERFORMED/UNIT INFO.

Drove to USARC, checked in, went to the mechanical room of the BMA building, I installed the new pressure switch and calibrated it through the controller, it still would not pick up and read correctly, I called tech support and we tried a few different things but they determined the board is faulty and being 15 years old it is obsolete, they gave me a new part number to replace the controller.

NATURE OF WORK

Regular Service _____

Quoted Service _____

Start-up/Warranty _____

SPD _____

Contract Service _____

Energy Management _____

PARTS, MATERIALS AND SUBCONTRACTED SERVICES

| QTY. | PART NO. | DESCRIPTION | P.L. | VENDOR | |
|------|----------|--------------------------------|------|--------|--------|
| 1 | | Shipping | | Chase | 249605 |
| 1 | | PTD-100-10 Pressure Transducer | | Chase | 249605 |
| | | | | | |
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SUMMARY OF TIME

| SERVICE TECHNICIAN | ON SITE REG. | ON SITE O.T. | REG. TRAVEL | O.T. TRAVEL | TOTAL HRS. | MEALS | LODGING | TOLLS | MILES | OTHER |
|----------------------|--------------|--------------|-------------|-------------|------------|-------|---------|-------|-------|-------|
| 1305 Jordan Koblentz | 3.50 | | | | 3.50 | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

JOB COMPLETE YES X NO _____ EXPLAIN _____

SIGNATURE _____

Customer Representative