

(845) 561-5030
Fax (845) 561-0038

HVAC SERVICE ORDER INVOICE

428383

BILL TO

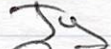
THIS WORK IS TO BE	
<input type="checkbox"/> C.O.D.	<input type="checkbox"/> CHARGE
<input type="checkbox"/> NO CHARGE	
MAKE	MAKE
MODEL	MODEL
SERIAL NUMBER	SERIAL NUMBER

NAME Army Recruting		DATE 5/21/21
STREET 910 Raz Ave		PROMISED
CITY New Windsor NY		
PHONE		CALL BEFORE <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
TECHNICIAN Jy / Paul		AUTHORIZED BY
WORK TO BE PERFORMED Repair Brack Flow Preventer		
P.O. #		

ENVIRONMENTAL CHECK LIST			RECOMMENDATIONS
WORK PERFORMED	QTY.	TYPE/DISPOSITION	
<input type="checkbox"/> RECOVERED			
<input type="checkbox"/> RECYCLED			
<input type="checkbox"/> RECLAIMED			
<input type="checkbox"/> RETURNED			
<input type="checkbox"/> DISPOSAL			
<input type="checkbox"/> DISMANTLED <input type="checkbox"/> CHANGED OUT/REPLACED		TOTAL \$	

QTY.	MATERIALS & SERVICES	UNIT PRICE	AMOUNT
	REFRIGERANT R- LBS.		
1	Back Flow Preventer		
2	4 " Flange gaskets		
	FILTERS X X		
>	FILTERS X X		
	BELTS		

Shut water Down to Building
and Replaced existing Backflow
Preventer with new.
Turned water back on and
checked for leaks

TOTAL MATERIALS			
HRS.	LABOR	RATE	AMOUNT
			
TOTAL LABOR			

LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.	TOTAL SUMMARY		
	TOTAL MATERIALS		
	TOTAL LABOR		
	PerQuote	7,996. ⁰⁰	
<input type="checkbox"/> REGULAR <input type="checkbox"/> WARRANTY <input type="checkbox"/> SERVICE CONTRACT	TAX		
Thank You	TOTAL		

TERMS

All sums due hereunder, if not paid within THIRTY (30) days of the above date, shall bear interest at the rate of 1.5% per month. In the event litigation is commenced to collect any sums due hereunder, the prevailing party in such litigation shall be entitled to an award of reasonable attorney's fee.

I have authority to order the work outlined above which has been satisfactorily completed. I agree that Seller retains title to equipment/materials furnished until final payment is made. If payment is not made as agreed, Seller can remove said equipment/materials at Seller's expense. Any damage resulting from said removal shall not be the responsibility of Seller.

~~CUSTOMER SIGNATURE~~

DATE _____

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

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

FACID/Building: 910 Rqz Ave Date of Visit: 5/2/21

Contractor Personnel on Site:

- | | |
|----------------------|----------|
| 1. <u>Sy Rameri</u> | 4. _____ |
| 2. <u>Paul Hayes</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

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

- | |
|---------------------------------------|
| 1. <u>Replace Back Flow Preventer</u> |
| 2. _____ |
| 3. _____ |
| 4. _____ |

Inspection, Testing, and Certification

- | |
|----------|
| 1. _____ |
| 2. _____ |
| 3. _____ |
| 4. _____ |

Other Recurring Services

- | |
|----------|
| 1. _____ |
| 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

WO# 10368 CSS# 27253
Replaced Back Flow Preventer
in Main Building 1st Floor mech
Room

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jay Rainer Date: 5/21/21

Signed: [Signature]

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: JAMES JOHNSON AFOS Date: 5-21-21

Signed: [Signature]

E-Mail: _____