

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

# HVAC SERVICE ORDER INVOICE

CSS#1623

434522

BILL TO

CMI

THIS WORK IS TO BE	
<input type="checkbox"/> C.O.D.	<input type="checkbox"/> CHARGE
<input type="checkbox"/> NO CHARGE	
MAKE <i>Plane</i>	MAKE
MODEL <i>1554-UROH AU FN</i>	MODEL
SERIAL NUMBER <i>U08TQ1376</i>	SERIAL NUMBER

NAME Army Recruit		DATE 8/1/22
STREET 910 Raz Ave		PROMISE
CITY > New Windsor NY		
PHONE	CALL BEFORE	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
TECHNICIAN Jy / Steve M	AUTHORIZED BY	
WORK TO BE PERFORMED Replace cond Fans + Motors		
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.		
2	condenser Fan Motors		
2	cond Fan Blades		
	FILTERS X X		
>	FILTERS X X		
	BELTS		

DATE	DESCRIPTION OF WORK PERFORMED
11/1/2018	Replaced condenser fan motors + Blades on circuits B + E on Trane Chiller. Start + tested <del>unit</del> unit

TOTAL MATERIALS			
HRS.	LABOR	RATE	AMOUNT
	53 steel m		
TOTAL LABOR			

<b>LIMITED WARRANTY:</b> 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.	<b>TOTAL SUMMARY</b>		
	<b>TOTAL MATERIALS</b>		
	<b>TOTAL LABOR</b>		
	<i>Per Quote 6,780.<sup>00</sup></i>		
<input type="checkbox"/> REGULAR <input type="checkbox"/> WARRANTY			
<input type="checkbox"/> SERVICE CONTRACT			
<i>Thank You</i>	<b>TOTAL</b>		

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

FACID/Building: 910 Raz Ave Date of Visit: 8/1/22

**Contractor Personnel on Site:**

- |                         |          |
|-------------------------|----------|
| 1. <u>Jay Rammeri</u>   | 4. _____ |
| 2. <u>Steve Messina</u> | 5. _____ |
| 3. _____                | 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. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Service Calls - Service Call Number and Description**

1. CSS# 1623 Replace 2 condenser Fan
2. Motors and Fan Blades on Chiller
3. \_\_\_\_\_

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

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CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jay Rainieri Date: 3/1/22

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 RHOS Date: 3-1-22

Signed: [Signature]

E-Mail: james.m.johnson.11452TR@ARMY.MIL