

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

HVAC SERVICE ORDER INVOICE

CSS# 32370
WO# 14854

429684

eval condensed

BILL TO

THIS WORK IS TO BE	
<input type="checkbox"/> C.O.D.	<input type="checkbox"/> CHARGE <input type="checkbox"/> NO CHARGE
MAKE Mitsubishi	MAKE Mitsubishi
MODEL PXA-A18HA7	MODEL Puy-A18NKA7
SERIAL NUMBER 35A09517C	SERIAL NUMBER 72U06201B

NAME US Army Reserve		DATE 8/30/21
STREET 123 RT 303		PROMISED
CITY > Orange Bury NY		
PHONE	CALL BEFORE <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	
TECHNICIAN JG	AUTHORIZED BY	
WORK TO BE PERFORMED Ductless in elec Room		
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.		
	FILTERS X X		
>	FILTERS X X		
	BELTS		

DESCRIPTION OF WORK PERFORMED

Ductless In elec Room was not Running and no display on controller. Turned power off and back on and system was reset + Running
* issue possibly from recent * storm power surge


TOTAL MATERIALS			
HRS.	LABOR	RATE	AMOUNT
1	59	163. ⁰⁰	
TOTAL LABOR			163. ⁰⁰

[illegible]

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 _____

<p>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.</p> <p><input type="checkbox"/> REGULAR <input type="checkbox"/> WARRANTY</p> <p><input type="checkbox"/> SERVICE CONTRACT</p> <p><i>Thank You</i></p>	TOTAL MATERIALS		
	TOTAL LABOR	163 ⁰⁰	
	TAX		
	TOTAL		

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

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

FACID/Building: Garage dec Room

Date of Visit: 8/30/21

Contractor Personnel on Site:

1. Jay Ravier
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. _____
2. _____
3. _____
4. _____

Service Calls – Service Call Number and Description

1. CSS# 32370 WO# 14854 no A/C
2. _____
3. _____

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

Powered unit on + off each
Reset controller. Unit Running

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jay Rainer Date: 8/30/21

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: Elois Castillo Date: 30/08/21

Signed: [Signature]

E-Mail: _____

