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P.O. Box 119 • Altavista, VA • 800.789.7199 • service@mooreselectric.com

Billing Address	Site Address
Customer: TIDEWATER, INC Address: 6625 SELNICK DRIVE ELKRIDGE MD 21075 Phone: 614-623-9569	Customer: USARC VA006 CVILLE Address: 1634 CHERRY AVE CHARLOTTESVILLE VA 22903 Phone: 614-623-9569
Service Call #: COM0172673	Call Type: COM-PLMB

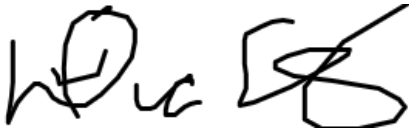
Service Requested
PO: CSS 34302 NTE: \$450 ETA: 2/3 SEV: HIGH The Backflow Preventer needs to be tested and Certified *please provide us with a quote to perform this work* ***We will also need a "BEFORE" picture provided with your quote if repairs will be more than \$450.00.***** *This site requires that a Backflow Test Maintenance Report from the City of Charlottesville is filled out. This form is attached and MUST be completed and returned* We will also need a "BEFORE" picture provided with your quote if repairs will be more than \$450.00. Please also attach a (COW) form that needs to be filled out completely and signed by your Technician and the facility POC upon completion of the site visit along with picture of the completed work. NOTE: This is only approval for your tech to work on this scope of work. IF site personnel requests other work to be completed outside of stated work -please ask them to put a service call request in with the AFOS or RFOS and then we can get their concerns addressed -Thank you ****GABBY 410-688-0142****

Problems					
Description	Tech	Equip. Desc and Model	Manufacturer	Equip. Serial	Asset ID
BACKFLOW ISSUE OR CHECK	BRADWILLIA				

Tech Notes
Tech: BRAD WILLIAMS, Date: 2/3/22 10:07 AM - Drove to site and checked in. Attempted to test 3/4" back flow device. Check valve #1 leaked and the relief valve is dripping. Took check valve 1 out and cleaned then replaced, removed relief valve and cleaned then replaced. Attempted to test device again but same issue. This device needs to be rebuilt.

Labor			
Date	Technician	Description	Hours
2/3/2022	BRAD WILLIAMS	REGULAR PLUMBING LABOR	1.50

Materials			
Date	Part Number	Description	Quantity
2/3/2022	CMISCX-A2-3-5-6-7 INTAL BACKF	AREA 2,3,5,6,7 INTITAL BACKFLOW TEST	1.000

Signed By Diana Ellis	Signature 	Date 2/3/2022
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