

Service Items

| Name | Description | Tier 1 Price | Unit Type | QTY | Taxable |
|----------------|---|--------------|-----------|-----|---------|
| Labor | See attached pages for details of work performed. | \$0.00 | Hour | 1 | N |
| TOTAL*: | \$0.00 | | | | |

* Not including taxes



Service Forms

Daily Form Fill out every day, even on PMs, and projects
TECH NAME Tom Timlin
DATE 6/26/23
POINT OF CONTACT: Reginald
DESCRIPTION OF WORK PERFORMED Once we got the water back onto the building, we found the men's handicap toilet flushing, and it would not stop. Tried turning the water shut off on it, but the valve was not working and just sprayed water out of the screw. Called Reginald and spoke to him about the issue, and he approved replacing the closet flush valve. Went and got a new flush valve and returned to replace it. Changed it, and once we got the buildings water turned back on, we checked for leaks. Every time we flushed, it was leaking right where the valve went to the porcelain. Went and got a new toilet spud because I could not get the old one to seal back up. Returned and installed it into the toilet and reassembled the valve again. Checked for leaks and all is good at this time.
TOOLS USED hand tools
MATERIALS USED OR PICTURE OF TAG* 1: Sloan 110 closet flush valve
1: 1 1/2" spud
HOURS REGULAR: 3
OVERTIME:



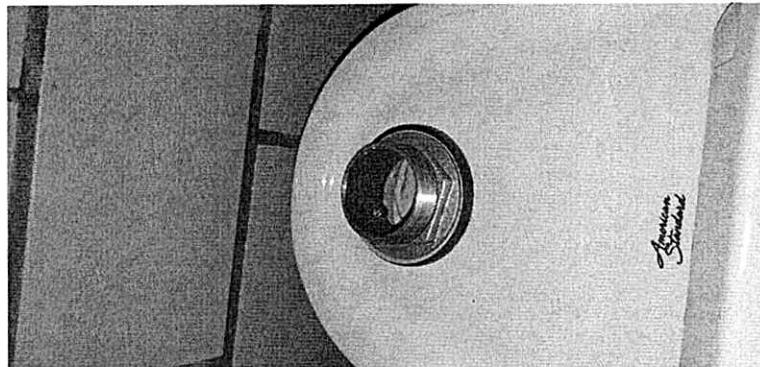
Attachments

Title File Name
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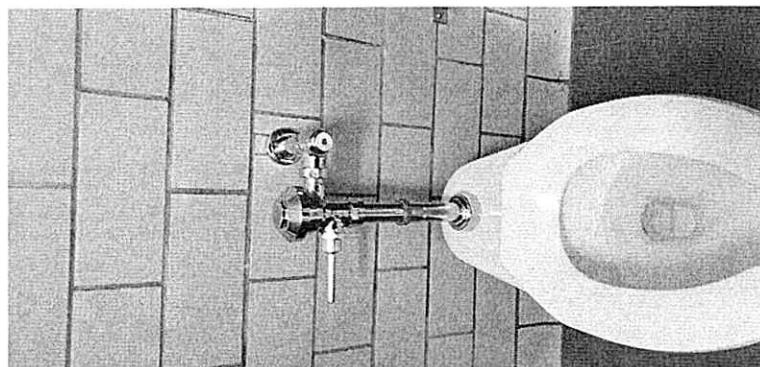
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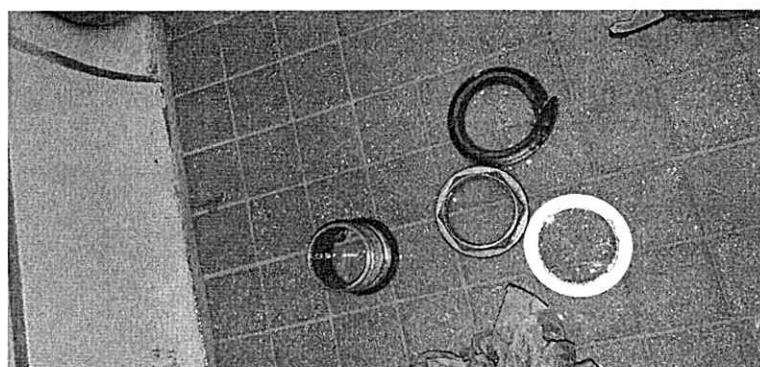
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6-12-23 Meadville Mens handicap toilet valve.pdf
handicap toilet valve

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

FACID/Building: PA062 Date of Visit: 6/26/23

Contractor Personnel on Site:

1. Tom Timlin 2. _____

Work Performed:

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

1. _____

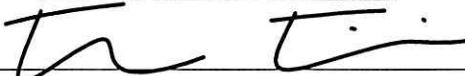
Service Calls – Service Call Number and Description

1. CSS# 93578. Replacement of the first water main valve
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tom Timlin Date: 6/26/23

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, 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.
This is NOT a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: Rebecca Dithrich, GS-09 Date: 6/26/23

Signed: 

E-Mail: rebecca.l.dithrich.civ@army.mil