

*Frazek*

Customer Name *DuPont Experimental Station*

Service Order Number **260-1006130**

Bill To  Same as above

Equipment ID (Tag ID) *Chiller #8*

Work Site *E315 Powerhouse*

Problem *Oil AMOT Valve*

Work Site Address *Wilmington, DE*

Contact Name/Phone *Tom Sliwinski*

Additional Billing Information

Quoted Price/Flat Rate \$ \_\_\_\_\_

Resolved?  Yes Date 3/23/07  No

Type of Service:

T&M  No Charge  RAC  PSA# \_\_\_\_\_  Warranty to Installation # \_\_\_\_\_  Warranty to S.O. # \_\_\_\_\_

**PAYMENT AUTHORIZATIONS**

Purchase Order Number

Printed Name

*Tom Sliwinski*

Signature

*[Signature]*

Credit Card Type

MC  VISA  AMEX

Card Holder Name

Card Number

Expiration Date

\_\_\_\_/\_\_\_\_

**ACTIVITIES**

**COMMENTS**

Service Agent ID	Activity Type	Reg. Hours	1.5 OT Hrs.	2.0 OT Hrs.

Date	Miles/Km	Expenses	Explanation
		\$	

*Replacement of AMOT Valve.  
Material Cost only.*

Service Agent ID	Activity Type	Reg. Hours	1.5 OT Hrs.	2.0 OT Hrs.

Date	Miles/Km	Expenses	Explanation
		\$	

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		\$	

**MATERIALS**

PO #: Truck #: F/O #	Vendor	Qty.	Description	Part #
		1	Consumable Materials	CSM-1
	<i>JCI</i>	1	<i>AMOT Thermostatic Valve</i>	<i>022-08867-0</i>