

Frazek

Customer Name *DuPont E315*

Service Order Number **260-1006548**

Bill To Same as above

Equipment ID (Tag ID) *Chiller #7*

Work Site *Experimental Station*

Problem *Motor Oil Pressure Too High*

Work Site Address *Wilmington, DE*

Contact Name/Phone *Tom Sliwinski*

Additional Billing Information *REPAIR oil problem on your chiller #7 AT E315/POWERHOUSE*

Quoted Price/Flat Rate \$ _____ Resolved? Yes Date _____ No

Type of Service:

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

PAYMENT AUTHORIZATIONS

Purchase Order Number

LGGC099TS

Printed Name

THOMAS E. Sliwinski

Signature

[Signature] **5-21-07**

Credit Card Type

MC VISA AMEX

Card Holder Name

Card Number

Expiration Date

ACTIVITIES

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

Frazek

MC

6

Date Miles/Km Expenses Explanation

5/18/07

\$

COMMENTS

Installed throttling Globe valve and Pressure Guage inline with with Motor supply oil line, to limit pressure/flow to factory specs

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

Date Miles/Km Expenses Explanation

\$

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Date Miles/Km Expenses Explanation

\$

MATERIALS

PO #: Truck #: F/O #	Vendor	Qty.	Description	Part #
		1	Consumable Materials	CSM-1
<i>2299808</i>	<i>Deacon</i>		<i>Valve, Fittings, Guage</i>	
<i>2300998</i>	<i>Deacon</i>		<i>"</i>	
<i>260-1006548</i>	<i>Grainers</i>		<i>Valve, Pipe Nipple</i>	
<i>260-1006548</i>	<i>UR</i>		<i>Glycerin</i>	
<i>/</i>	<i>/</i>	<i>/</i>	<i>/</i>	

Frazek

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Equipment ID (Tag ID) Chiller #7

Work Site Experimental Station

Problem Motor Oil Pressure Too High

Work Site Address Wilmington, DE

Contact Name/Phone Tom Slivinski

Additional Billing Information

Quoted Price/Flat Rate \$ _____

Resolved? Yes Date 5/21/07 No

Type of Service:

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

PAYMENT AUTHORIZATIONS

Purchase Order Number LGGC099TS Printed Name X Signature _____

Credit Card Type MC VISA AMEX Card Holder Name _____ Card Number _____ Expiration Date 1

ACTIVITIES

COMMENTS

Service Agent ID	Activity Type	Reg. Hours	1.5 OT Hrs.	2.0 OT Hrs.
Frazek	MC	2	2	
Date	Miles/Km	Expenses	Explanation	
5/21	40	\$		

Started chiller. Monitored and adjusted pressure to motor bearings. Fixed leak on compression fitting.

Service Agent ID	Activity Type	Reg. Hours	1.5 OT Hrs.	2.0 OT Hrs.
Date	Miles/Km	Expenses	Explanation	
		\$		

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Date	Miles/Km	Expenses	Explanation	
		\$		

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Date	Miles/Km	Expenses	Explanation	
		\$		

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