TOWNSHIP OF CRANFORD

WWW.CRANFORDNJ.ORG
8 SPRINGFIELD AVE
CRANFORD, NJ 07016

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00474-02

ORDER DATE: 02/09/23
REQUISITION NO:
DELIVERY DATE: 12/28/23
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX ID #22-6001739 - TAX EXEMPT

SHIP TO

Fire Department
7 Springfield Avenue
Cranford, NJ 07016
T:908-709-7360 F:908-276-6183

VENDOR

VENDOR #: SURVIV

Survivor Fire & Security
Survivor Fire & Safety Equip
39A Myrtle St.
Cranford, NJ 07016

Phone: (908)272-0066 Fax: (908)272-8144

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	Labor-AfterHours-Sprinkler Service Call	3-01-26-310-115-221 B&G Firehouse: Maintenance & Repairs	395.0000	395.00
2.00	Labor-AfterHours-Sprinkler	3-01-26-310-115-221 B&G Firehouse: Maintenance & Repairs	195.0000	390.00
1.00	Fuel Surcharge	3-01-26-310-115-221 B&G Firehouse: Maintenance & Repairs	7.5000	7.50
			TOTAL	792.50

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

X Signature on file
VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

TOWNSHIP OF CRANFORD
WWW.CRANFORDNJ.ORG
8 SPRINGFIELD AVE
CRANFORD, NJ 07016

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Chief Financial Officer

PYE-BARKER FIRE & SAFETY LLC EST. 1948 | SURVIVOR

23-00474

INVOICE

Pye Barker Fire & Safety
DBA: Survivor Fire & Safety
39A MYRTLE ST
CRANFORD, NJ 07016-3471
9082720066
pyebarkerfire.com

Customer PO:	Order No:	Invoice No:	Due Date:
Need PO	ST00100290	IV00081578	12/06/2023
Invoice Date:	**Terms:**	**Invoice Total:**	**Amount Due:**
11/21/2023	Net 15	792.50	792.50

License: NJDFS#P01672

BILL TO:
69384 - Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

WORKSITE:
69384 - Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

Authorized By:	Job Number:	Service Location:	Bill To ID:	Worksite ID:	Technician:
Matt Lubin	SER0000022098	DBA: Survivor Fire & Safety	69384	69384	Nicholas Roberts

Item	Description	Qty	Unit Price	Total	Tax
Labor-AH-Sprinkler	Labor-AfterHours-Sprinkler Service Call	1	395.00	395.00	0.00
Labor-AH-Sprinkler	Labor-AfterHours-Sprinkler	2	195.00	390.00	0.00
FUEL	Fuel Surcharge	1	7.50	7.50	0.00
	Work Notes: Troubleshot dry sprinkler system. Need to return with parts to repair and place system back in service				

Save time and stamps by going paperless. View, print, and pay your invoices online at **https://customer.pyebarkerfire.com/**

Remit To Address:
Pye-Barker Fire & Safety, LLC
PO BOX 735358
Dallas, TX 75373-5358

PAY NOW:
https://customer.pyebarkerfire.com

Subtotal	792.50
Tax	0.00
Total	792.50

Pye-Barker Fire & Safety DBA: Survivor Fire & Safety
39A MYRTLE ST
CRANFORD NJ 07016-3471
9082720066
1234PZ@pyebarkerfs.com

Report Cover Page

SERVICE DATE: 11/19/2023

SERVICE TICKET: ST00100290

BUILDING	STREET	CITY	STATE	ZIP
Cranford Fire Department	7 Springfield Avenue	Cranford	NJ	07016

BUILDING CONTACT	PHONE
Na	9082760146

Please see the attached reports. If there are any questions, please reach out to the above office.

Download your Report at:

https://customer.pyebarkerfire.com

TR

Customer did not sign
No
ST00100290 -

Signed 11/19/2023

Inspector: Nicholas Roberts

Signed 11/19/2023

Building Contact: Na
Title:

Licenses:
NJDFS#P01672

PYE • BARKER
FIRE & SAFETY • EST 1946

SURVIVOR

Date : 11/19/2023
Frequency :
Service Ticket No. : ST00100290
Inspection Contract No. :
PO No. :
Equipment Location : null

DEMAND SERVICE FORM

Property	:	Cranford Fire Department	Owner	:	Cranford Fire Department
Address	:	7 Springfield Avenue	Address	:	7 Springfield Avenue
City	:	Cranford	City	:	Cranford
State	:	NJ	State	:	NJ
Zip	:	07016	Zip	:	07016
Phone	:	9082760146	Phone	:	9082760146

DEFICIENCIES

Repair Service Ticket - (Demand Ticket)

- Deficiency — System piping needs to be replaced, water flow switch needs to be replaced, tamper valves need to be adjusted. Low air switch needs to be installed

DEMAND SERVICE TICKET

What type of repair is this? Sprinkler

Description of work:

On arrival system drained of air and water. Checked boiler room and found a hole in the 2.5 branch line piping. Checked water flow switch for proper operation and found plunger was not working properly. Drained all low points and auxiliary drains. Left system out of service.

At completion of ticket did all repaired or replaced equipment function properly? No

SIGNATURE

This report was reviewed with:

Pye-Barker Fire & Safety

Print Name	:	Na	Technician	:	Nicholas Roberts
Signature	:	Customer did not sign Na ST00100290 -	Signature	:	
Date	:	11/19/2023	Date	:	11/19/2023

Pye-Barker Fire & Safety DBA: Survivor Fire & Safety
39A MYRTLE ST
CRANFORD NJ 07016-3471
9082720066
1234PZ@pyebarkerfs.com

Report Cover Page

SERVICE DATE: 11/19/2023

SERVICE TICKET: ST00100290

BUILDING	STREET	CITY	STATE	ZIP
Cranford Fire Department	7 Springfield Avenue	Cranford	NJ	07016

BUILDING CONTACT	PHONE
Na	

Please see the attached reports. If there are any questions, please reach out to the above office.

Download your Report at:

https://customer.pyebarkerfire.com

TR

Customer did not sign
Na
ST00100290 -

Signed 11/19/2023

Inspector: Nicholas Roberts

Signed 11/19/2023

Building Contact: Na
Title:

Licenses:
NJDFS#P01672

PYE • BARKER FIRE & SAFETY • EST 1945

SURVIVOR

Date : 11/19/2023
Frequency :
Service Ticket No. : ST00100290
Inspection Contract No. :
PO No. :
Equipment Location : null

Water-Based Deficiency Report

Property	:	Cranford Fire Department	Owner	:	Cranford Fire Department
Address	:	7 Springfield Avenue	Address	:	7 Springfield Avenue
City	:	Cranford	City	:	Cranford
State	:	NJ	State	:	NJ
Zip	:	07016	Zip	:	07016
Contact	:	Matt Lubin	Contact	:	Cathy Scotti
Phone	:		Phone	:	
Email	:	M-Lubin@Cranfordnj.Org	Email	:	C-Scotti@cranfordnj.org

Reporting Technician: Nicholas Roberts

What type of service is this for? [X] Sprinkler [ ] Backflow [ ] Hydrant(s) [ ] Fire Pump [ ] Internal Pipe

How many deficiencies need to be quoted? **3

How many technicians are needed to perform this repair? 2

List how many hours of drive time will be needed for this repair? 2

How many hours (per technician) will be needed to perform this repair? 8

Will this repair require any special equipment? (lift, confined space equipment, testing equipment,etc.) Yes

If special equipment is needed, list it here: Groover, pipe stand, cutter

Will this repair require a permit fee or another type of fee? No

Can this work be performed during the normal business hours of 8 am to 5 pm? Yes

Please explain the scope of work that needs to be completed. This includes specific parts needed for an accurate proposal to the customer:

Cut out V remove damaged section of 2.5 pipe and replace. Drill outlet for sprig. Add in low air switch on valve trim and replace pressure switch. Adjust tampers. Recharge system and place back into service.ned all low points and auxiliary drains. Left system out of service.

Control Valve Type, Make, Model and Size:

Valve Take Out (If valve may need replaced):

What material is the hydrant installed upon? (concrete, dirt, stone, etc...)? _____

Is there a control valve near by (including street valve)? _____

Quantity of bad/dirty sprinklers: _____

Sprinkler Make, Model, Temp, Size, Orientation and K Factor if available. Please insert quantity here if there is a variety of sprinklers that need replaced:

_____

Additional Pump Information:

REQUIRED PARTS

Part / Item Number	Description	Quantity	Comments
pS10	Pressure switch	1	
Ps40	Low air switch	1	
	Stick of 2.5 galvanized sch 10on of 2.5 pipe and replace. Drill outlet for sprig. Add in low air switch on valve trim and replace pressure switch. Adjust tampers. Recharge system and place back into service.ned all low points and auxiliary drains. Left system out of service.	1	
	2.5 galvanized couplingssch 10on of 2.5 pipe and replace. Drill outlet for sprig. Add in low air switch on valve trim and replace pressure switch. Adjust tampers. Recharge system and place back into service.ned all low points and auxiliary drains. Left system out of service.	2	
	2.5 x 1 mechanical teessch 10on of 2.5 pipe and replace. Drill outlet for sprig. Add in low air switch on valve trim and replace pressure switch. Adjust tampers. Recharge system and place back into service.ned all low points and auxiliary drains. Left system out of service.	1	
	1V2 tee galvanized teessch 10on of 2.5 pipe and replace. Drill outlet for sprig. Add in low air switch on valve trim and replace pressure switch. Adjust tampers. Recharge system and place back into service.ned all low points and auxiliary drains. Left system out of service.	1	
	GSA-CT1	1	Monitor module
	4 boxtee galvanized teessch 10on of 2.5 pipe and replace. Drill outlet for sprig. Add in low air switch on valve trim and replace pressure switch. Adjust tampers. Recharge system and place back into service.ned all low points and auxiliary drains. Left system out of service.	1	

Deficiency

SIGNATURE

This report was reviewed with:

Pye-Barker Fire & Safety

Print Name	: Na	Technician	: Nicholas Roberts TR
Signature	: Customer did not sign Na ST00100290 -	Signature	:
Date	: 11/19/2023	Date	: 11/19/2023