

MF METRO FIRE & SAFETY

EQUIPMENT CO., INC.

509 Washington Avenue
Carlstadt, NJ 07072
Phone: (201) 635-0400 - Fax: (201) 635-0410

Invoice #: SM 41527

Invoice Date: 11/16/2021

Completion Date: 11/5/2021

Technician: Roman;Eduardo

Bill To: Leonia Board of Education
570 Grand Avenue
Attn: Accounts Payable
Leonia, NJ 07605

Service At: Anna C. Scott School
Fort Lee Road & Highland St.
Leonia, NJ 07605

Division: Sprinklers - Service/Repair
Description: S-Inspection Needed

PO Number:
Alt #:

Terms: 10 Days
Due Date: 11/26/2021

WO#	Item	Description	Qty	Unit Price	Amount
48277					
	Service				
		S - Quarterly Sprinkler System Inspection	1.00	520.00	520.00
		(1) dry sprinkler system			
		(3) wet sprinkler systems			

The Fire Safety Professionals Since 1962

Subtotal:	520.00
Sales Tax:	0.00
Total Due:	520.00

Please return this part with a check or money order made payable to Metro Fire & Safety.



509 Washington Avenue
Carlstadt, NJ 07072
Phone: (201) 635-0400 - Fax: (201) 635-0410

Credit Card Information

Card Number:

Expiration:

mm / yy

CVV:



E-mail:

(If Receipt is Required/Requested)

* 3% Credit Card Processing Fee Will Apply

Account ID	LEOBOA	Amount Due	\$ 520.00
Invoice	41527	Amount Paid	

METRO FIRE & SAFETY

EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 636-0400 - Fax: (201) 636-0410

WORK ORDER #

48277

SERVICE ID:

LEONIABOE-SCOTT
 Anna C. Scott School
 Fort Lee Road & Highland St.
 Leonia, NJ 07605

AR ID:

LEOBOA
 Leonia Board of Education
 570 Grand Avenue
 Attn: Accounts Payable
 Leonia, NJ 07605

CONTACT: (201) 302-5200 Kevin
 ALT CONTACT: (201) 424-2847

TERMS: 10 Days
 PO #:

DIVISION: Sprinklers - Service/Repair
 CALL TYPE: PM's
 PROBLEM: S-Inspection Needed
 COMMENTS: Quarterly Fire Sprinkler Inspection

BILLABLE LABOR:

Men Hours

LEAD TECHNICIAN: Tito
 HELPER / RETURN: Norman
 DATE COMPLETED: 11-5-2021

MEMO: Woods@leoniaschools.org

SPECIAL NOTES:

EQUIPMENT:

Central 3" MODEL M DRY Sprinkler Located in 2nd floor room 249 by Room 300
 Central 4" MODEL G WET Sprinkler Located in boiler room
 1-1/4" WET Sprinkler Located in custodian's office
 1-1/2" WET Sprinkler Located in generator room

PARTS QTY

☒ All Control Valves Left in Wide Open Position

☒ Left System in Service

☐ Customer to Provide Fire Watch

Comments: Customer not on site for signature

	AMOUNT
Service	520.00
Discount	
Parts	
DOT/Hazmat	
3% Credit Card Fee	
Sub Total	520
Sales Tax	
TOTAL	520

By signing I agree to the information and description of services as explained above as well as the General Terms and Conditions that are available on our website www.metrofire.com. A hard copy will be furnished upon request.

Signature: _____

Name: _____

The Fire Safety Professionals Since 1962

NJ State Certified Contractor #: P00111 DOT Registration #: A-400

SEPT QIS DE REC 2021

METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

Invoice #: SM 41529

Invoice Date: 11/16/2021

Completion Date: 11/5/2021

Technician: Roman;Eduardo

Bill To: Leonia Board of Education
 570 Grand Avenue
 Attn: Accounts Payable
 Leonia, NJ 07605

Service At: Leonia High School
 100 Christie Heights Street
 Leonia, NJ 07605

Division: Sprinklers - Service/Repair
Description: S-Inspection Needed

PO Number:
Alt #:

Terms: 10 Days
Due Date: 11/26/2021

WO#	Item	Description	Qty	Unit Price	Amount
48279	Service				
		S - Quarterly Sprinkler System Inspection (1) wet sprinkler system	1.00	200.00	200.00

The Fire Safety Professionals Since 1962

Subtotal:	200.00
Sales Tax:	0.00
Total Due:	200.00

Please return this part with a check or money order made payable to Metro Fire & Safety.

METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

Credit Card Information

Card Number:

Expiration:

mm / yy

CVV:



E-mail:

(If Receipt is Required/Requested)

* 3% Credit Card Processing Fee Will Apply

Account ID	LEOBOA	Amount Due	\$ 200.00
Invoice	41529	Amount Paid	

METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

WORK ORDER #

48279

SERVICE ID:

LEONIABOE-HIGH
 Leonia High School
 100 Christie Heights Street
 Leonia, NJ 07605

AR ID:

LEOBOA
 Leonia Board of Education
 570 Grand Avenue
 Attn: Accounts Payable
 Leonia, NJ 07605

CONTACT: (201) 424-2847 Kevin
 ALT CONTACT:

TERMS: 10 Days
 PO #:

DIVISION: Sprinklers - Service/Repair
 CALL TYPE: PM's
 PROBLEM: S-Inspection Needed
 COMMENTS: Quarterly Fire Sprinkler Inspection

BILLABLE LABOR:
 ___ Men ___ Hours

LEAD TECHNICIAN: Jito
 HELPER / RETURN: Norman
 DATE COMPLETED: 11-5-2011

MEMO: Woods@leoniaschools.org

SPECIAL NOTES:

EQUIPMENT:

2-1/2" WET Sprinkler Located in chemical storage room

PARTS QTY

☒ All Control Valves Left in Wide Open Position

☒ Left System in Service

☐ Customer to Provide Fire Watch

Comments: Customer not on site for signature

	AMOUNT
Service	200.00
Discount	
Parts	
DOT/Hazmat	
3% Credit Card Fee	
Sub Total	200
Sales Tax	
TOTAL	200

By signing I agree to the information and description of services as explained above as well as the General Terms and Conditions that are available on our website www.metrofire.com. A hard copy will be furnished upon request.

Signature: _____

Name: _____

The Fire Safety Professionals Since 1962

NJ State Certified Contractor #: P00111 DOT Registration #: A-400

SEPT DIS. DS. PER 150 -

METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

Invoice #: SM 41528

Invoice Date: 11/16/2021

Completion Date: 11/5/2021

Technician: Roman;Eduardo

Bill To: Leonia Board of Education
 570 Grand Avenue
 Attn: Accounts Payable
 Leonia, NJ 07605

Service At: Leonia Annex Building
 542 Grand Avenue
 Leonia, NJ 07605

Division: Sprinklers - Service/Repair
Description: S-Inspection Needed

PO Number:
Alt #:

Terms: 10 Days
Due Date: 11/26/2021

WO#	Item	Description	Qty	Unit Price	Amount
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50493

Service

		S - Quarterly Sprinkler System Inspection (1) wet sprinkler system	1.00	200.00	200.00
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Subtotal:	200.00
Sales Tax:	0.00
Total Due:	200.00

The Fire Safety Professionals Since 1962

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METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

Credit Card Information

Card Number: _____

Expiration: ____ / ____ CVV: _____

mm yy    

E-mail: _____
 (If Receipt is Required/Requested)

* 3% Credit Card Processing Fee Will Apply

Account ID	LEOBOA	Amount Due	\$ 200.00
Invoice	41528	Amount Paid	

METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

WORK ORDER #

50493

SERVICE ID:

LEONIABOE-ANNEX
 Leonia Annex Building
 542 Grand Avenue
 Leonia, NJ 07605

AR ID:

LEOBOA
 Leonia Board of Education
 570 Grand Avenue
 Attn: Accounts Payable
 Leonia, NJ 07605

CONTACT: (201) 302-5200 Keith
 ALT CONTACT: (201) 424-2847 cell

TERMS: 10 Days
 PO #:

DIVISION: Sprinklers - Service/Repair
 CALL TYPE: PM's
 PROBLEM: S-Inspection Needed
 COMMENTS: Quarterly Fire Sprinkler Inspection

BILLABLE LABOR:
 ___ Men ___ Hours

LEAD TECHNICIAN: Tito
 HELPER / RETURN: Norman
 DATE COMPLETED: 11-5-2011

MEMO: Woods@leoniaschools.org

SPECIAL NOTES:

EQUIPMENT:

2" WET Sprinkler Located in basement

PARTS

QTY

☒ All Control Valves Left in Wide Open Position

☒ Left System in Service

☐ Customer to Provide Fire Watch

Comments: customer not on site for signature

	AMOUNT
Service	200.00
Discount	
Parts	
DOT/Hazmat	
3% Credit Card Fee	
Sub Total	200
Sales Tax	
TOTAL	200

By signing I agree to the information and description of services as explained above as well as the General Terms and Conditions that are available on our website www.metrofire.com. A hard copy will be furnished upon request.

Signature: _____

Name: _____

The Fire Safety Professionals Since 1962

NJ State Certified Contractor #: P00111 DOT Registration #: A-400

METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

Invoice #: SM 41530

Invoice Date: 11/16/2021

Completion Date: 11/5/2021

Technician: Roman;Eduardo

Bill To: Leonia Board of Education
 570 Grand Avenue
 Attn: Accounts Payable
 Leonia, NJ 07605

Service At: Leonia Middle School
 500 Broad Avenue
 Leonia, NJ 07605

Division: Sprinklers - Service/Repair
Description: S-Inspection Needed

PO Number:
Alt #:

Terms: 10 Days
Due Date: 11/26/2021

WO#	Item	Description	Qty	Unit Price	Amount
48278					
	Service				
		S - Quarterly Sprinkler System Inspection (1) wet sprinkler system	1.00	200.00	200.00

The Fire Safety Professionals Since 1962

Subtotal:	200.00
Sales Tax:	0.00
Total Due:	200.00

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509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

Credit Card Information

Card Number:

Expiration: ____ / ____ **CVV:** ____
 mm yy



E-mail:

(If Receipt Is Required/Requested)

* 3% Credit Card Processing Fee Will Apply

Account ID	LEOBOA	Amount Due	\$ 200.00
Invoice	41530	Amount Paid	

METRO FIRE & SAFETY EQUIPMENT CO., INC.

509 Washington Avenue
 Carlstadt, NJ 07072
 Phone: (201) 635-0400 - Fax: (201) 635-0410

WORK ORDER #

48278

SERVICE ID:

LEONIABOE-MIDDLE
 Leonia Middle School
 500 Broad Avenue
 Leonia, NJ 07605

AR ID:

LEOBOA
 Leonia Board of Education
 570 Grand Avenue
 Attn: Accounts Payable
 Leonia, NJ 07605

CONTACT: (201) 424-2847 Kevin
 ALT CONTACT:

TERMS: 10 Days
 PO #:

DIVISION: Sprinklers - Service/Repair
 CALL TYPE: PM's
 PROBLEM: S-Inspection Needed
 COMMENTS: Quarterly Fire Sprinkler Inspection

BILLABLE LABOR:

___ Men ___ Hours

LEAD TECHNICIAN: THO
 HELPER / RETURN: Norman
 DATE COMPLETED: 11-5-2001

MEMO: Woods@leoniashools.org

SPECIAL NOTES:

EQUIPMENT:

Reliable 4" MODEL G WET Sprinkler Located in boiler/gas meter room

PARTS

QTY

☒ All Control Valves Left in Wide Open Position

☒ Left System in Service

☐ Customer to Provide Fire Watch

Comments: Customer not on site for signature

	AMOUNT
Service	200.00
Discount	
Parts	
DOT/Hazmat	
3% Credit Card Fee	
Sub Total	200
Sales Tax	
TOTAL	200

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Signature: _____

Name: _____

The Fire Safety Professionals Since 1962

NJ State Certified Contractor #: P00111 DOT Registration #: A-400