

# Service Report



## WORK ORDER ID: CWKD6975533

**WORK ORDER TYPE:** Preventative Maintenance

**CUSTOMER:** UNIVERSITY OF KS MED CTR-CTSU | **DEPARTMENT:** 146148-UNIVERSITY OF KS MED CTR-CTSU-BIOMED | **ACCOUNT NUMBER:** 146148

**CONTACT:**

**CUSTOMER PO#:**

**CONTACT PHONE:**

**CUSTOMER REFERENCE:**

**BILLING ADDRESS:** PO Box 3160 Mail Stop 6011 Kansas City, KS 66103

**SHIPPING ADDRESS:** 4350 Shawnee Mission Parkway Mail Stop 6011 Fairway, KS 66205

**AGILITY ASSET ID :** 1887912 | **SERIAL #:** 7075159 | **VENDOR SITE ID:** | **CUSTOMER ASSET ID:**

**ASSET TYPE:** FREEZERS, LABORATORY | **MANUFACTURER:** AEGIS SCIENTIFIC | **MODEL:** SERIES II FREEZER

**SERVICE REQUESTED:** PM DUE

**SERVICE PROVIDED TYPE:** Scheduled Maintenance

**WORK COMPLETED:** 01-22-2025

### LABOR

SERVICE PROVIDER	CATEGORY	HOURS	PERIOD DEFINITION	SERVICE DATE
Stephanie Dye	PM Not Covered	0.5	M-F 8-5	01/22/25

### SERVICE PROVIDED DETAILS

UNIT PASSED ALL REQUIRED TESTING AT THIS TIME

### TEST EQUIPMENT

PREFIX	UNIT	DESCRIPTION	CALIBRATION DATE
DM1	0286	DIGITAL MULTIMETER	04/04/24

### CHECKLIST

**PROCEDURE: L1100 L1**

**QUESTION**

**ANSWER**

CES THERM. - FREEZER (if applicable)	36.1
CES THERM. - REFRIGERATOR	37
CUST. THERM. - FREEZER (if applicable)	36
CUST. THERM. - REFRIGERATOR	37
DESIRED TEMP. - FREEZER (if applicable)	36
DESIRED TEMP. - REFRIGERATOR	37
Electrical Safety Inspection	Pass
GASKET SEAL	Pass
High Temperature Alarm	Yes
Low Temperature Alarm	Yes
Mechanical Safety Inspection	Pass
Operational Check	Pass
STANDS LEVEL	Pass
STANDS SOLIDLY	Pass

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Customer Signature:

Date:

*Stephanie Dye*

1/22/25

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Technician Signature:

Date: