

**TRANE**Trane U.S. Inc.
2313 S 20th Street
La Crosse, WI 54601
United States

Page 1 of 1

RECEIVED

Invoice

For questions please contact:

Charlotte TCS SO, NC
Tel: 704-525-9600
Fax:

Remit Payment To

Trane U.S. Inc.
P. O. Box 406469
ATLANTA, GA 30384-6469

FINANCE

Invoice Number

314092790

Invoice Date

08-NOV-2023

Customer No.

163124

Reference No.

F172353

Internal Account

3172961

Payment Terms

.5%10 NET30

Payment Due Date

08-Dec-2023

Discount Date

18-Nov-2023

Bill To

T2 P1 163308-2-3-2 - 391
LINCOLN COUNTY MAINTENANCE
435 SALEM CHURCH RD
LINCOLN, NC 28092-8856

000391

This instrument has been pre-audited in the
manner required by the Local Government
Budget and Fiscal Control Act

NOV 15 2023

Sold To

LINCOLN COUNTY MAINTENANCE
435 SALEM CHURCH ROAD
LINCOLN, NC 28092
UNITED STATES

Ship To

200 GAMBLE DRIVE
LINCOLN, NC 28092

Customer Tax ID

Incoterms

Supply Location

Charlotte TCS SO, NC

Shipping Method

Tracking No.

Freight Terms

Bill of Lading

<https://www.tranetechnologies.com/customer>

CERTifyTax - for submittal of tax exemption certificates.

Receivables - access invoice copies, account balances & make payments.

1013790273

| | | | | |
|------------------------|-----------------------------|------------------------------|------------------------|----------------------------|
| Tax/GST ID: 25-0900465 | State Tax: 3,682.67 4.7500% | County Tax: 1,744.42 2.2500% | City Tax: 0.00 0.0000% | District Tax: 0.00 0.0000% |
| PST/GST ID: | NC | LINCOLN | LINCOLN | LINCOLN |

| Currency | Subtotal | Special Charges | Tax | Freight | Total |
|----------|----------|-----------------|---------|---------|----------|
| USD | 77529.80 | 0.00 | 5427.09 | 0.00 | 82956.89 |

| Special Instructions | Lincoln Co Health Dept Chiller Bernardo Zuniga Project Manager 704-223-0883 bernardo.zunigamoraes@trane.com Shelby Johnson Project Administrator 704-558-4636 shelby.johnson@trane.com |
|----------------------|--|
|----------------------|--|

| Contract No. | Contract Date | Ship Date | Purchase Order |
|--------------|---------------|-------------|----------------|
| CID00106413 | 23-AUG-2022 | 08-NOV-2023 | 00230324 |

Application No.

02

for work completed thru

08-NOV-2023

- ORIGINAL CONTRACT SUM: \$387,649.00
- NET CHANGE BY CHANGE ORDERS: \$0.00
- CONTRACT SUM TO DATE: \$387,649.00
- TOTAL COMPLETED & STORED TO DATE: \$96,912.25
 - Percentage Completed: 25.00%
- RETAINAGE:
 - 0.00% of Completed Work: \$0.00
 - 0.00% of Stored Material: \$0.00
 Total Retainage: \$0.00
- TOTAL EARNED LESS RETAINAGE: \$96,912.25
- LESS PREVIOUS REQUESTS FOR PAYMENT: \$19,382.45

Sections Included: Summary Sheet and Detail
Sheet(s)

11-14-23

| | | |
|------------------------------|-------------|--------|
| Ven # 1250 | PO # 230324 | Proj # |
| AGG # 4210-51-00-57401-42101 | | |
| Acct #: | \$82,956.89 | |
| Acct #: | \$ | |
| Manager: | Dept | |

10. Amount Due This Requisition:

\$82,956.89

Inv# 314092790
Trane US Inc
11/08/2023 # Pages 1
PO# 230324

\$ 82,956.89

OUR PAYMENT

FP1 D0C144S3341



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TRANE



APPLICATION AND CERTIFICATION FOR PAYMENT (SUMMARY SHEET)

Invoice: 314092790

To: LINCOLN COUNTY MAINTENANCE CONTRACT LINCOLN CO HEALTH DEPT CHILLER NAME:

APPLICATION NO: 02
APPLICATION DATE: 08-NOV-2023
PERIOD TO: 08-NOV-2023
CUST PO NO: 00230324

From: Trane
4501 SOUTH TRYON STREET
CHARLOTTE, NC 28217

CONTRACT 200 GAMBLE DRIVE
LOCATION: LINCOLNTON, NC 28092
CONTRACT DATE: 23-AUG-2022
CONTRACT NO: CID00106413

APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract.

The undersigned Company Certifies that to the best of the Company's knowledge, information and belief, the work covered by this Application For Payment has been completed in accordance with the Contract Documents, and that current payment shown herein is now due

- 1 ORIGINAL CONTRACT SUM: \$387,649.00
- 2 NET CHANGE BY CHANGE ORDERS: \$0.00
- 3 CONTRACT SUM TO DATE (Line 1 +/- 2) \$387,649.00
- 4 TOTAL COMPLETED & STORED TO DATE: (Column G on Detail Sheet) \$96,912.25

- 5 RETAINAGE:
 - a. 0.00% of Completed Work: (Columns D + E on Detail Sheet) \$0.00
 - b. 0.00% of Stored Material: (Column F on Detail Sheet) \$0.00Total Retainage: (Line 5a+5b or Total in Column I of Detail Sheet) \$0.00

- 6 TOTAL EARNED LESS RETAINAGE: (Line 4 less Line 5 Total) \$96,912.25
- LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate) \$19,382.45
- 8 CURRENT PAYMENT DUE: (Before Applicable Sales Taxes) \$77,529.80

- 9 BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less line 6) \$290,736.75

| CHANGE ORDER SUMMARY | ADDITIONS | DEDUCTIONS |
|---|-----------|------------|
| Total changes approved in previous months | \$0.00 | \$0.00 |
| Total approved this Month | \$0.00 | \$0.00 |
| TOTALS | \$0.00 | \$0.00 |
| NET CHANGE BY CHANGE ORDERS: | \$0.00 | \$0.00 |

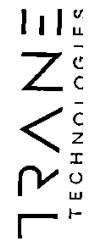
CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the undersigned company Certifies that to the best of their knowledge, information and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the company indicated above is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$77,529.80
(Attach explanation if amount certified differs from the amount applied for. Initial all figures on this Application and on the Detail Sheet that are changed to conform to the amount certified.)

CERTIFIER: BY: Date: ACCEPTANCE: BY: Date:

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the company named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the party under this Contract.





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DETAIL SHEET

APPLICATION AND CERTIFICATE FOR PAYMENT.
Containing Certification is attached

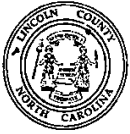
1013790273

Invoice: 314092790

APPLICATION NO: 02
APPLICATION DATE: 08-NOV-2023
PERIOD TO: 08-NOV-2023

CUST PO NO: 00230324
CONTRACT DATE: 23-AUG-2022
CONTRACT NO: CID00106413

| A No. | B DESCRIPTION OF WORK | C SCHEDULED VALUE | D WORK COMPLETED | | E THIS PERIOD | F MATERIALS PRESENTLY STORED (NOT IN D ORE) | G TOTAL COMPLETED AND STORED TO DATE (D+E+F) | H BALANCE TO FINISH (C-G) | I RETAINAGE |
|----------|--------------------------|-------------------------|---------------------------------------|--|------------------|--|--|------------------------------------|----------------|
| | | | FROM PREVIOUS APPLICATION (D+E) | | | | | | |
| 1 | Turnkey Project | 387,649.00 | 19,382.45 | | 77,529.80 | 0.00 | 96,912.25 | 290,736.75 | 0.00 |
| | TOTAL | 387,649.00 | 19,382.45 | | 77,529.80 | 0.00 | 96,912.25 | 290,736.75 | 0.00 |



Bill To 4210
Lincoln County Building Maint
435 Salem Church Road
Lincolnton, NC 28092

Ship To
Lincoln County Building Maint
435 Salem Church Road
Lincolnton, NC 28092

Vendor
Trane US Inc
PO Box 406469
Atlanta, GA 30384-6469

Purchase Order

Fiscal Year 2023

Page 1 of 1

**THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKAGES AND SHIPPING PAPERS.**

Purchase Order Number **00230324**

Purchase Order Date **08/23/2022**

Department **Facilities Maintenance**

Delivery must be made within doors of specified destination.

| VENDOR PHONE NUMBER | VENDOR FAX NUMBER | VENDOR NUMBER | REQUISITION NUMBER | BUYER NAME | DELIVERY REFERENCE |
|---------------------|-------------------|---------------|--------------------|------------|--------------------|
|---------------------|-------------------|---------------|--------------------|------------|--------------------|

1250

367

John Henry

NOTES

| ITEM # | DESCRIPTION | QUANTITY | UOM | UNIT PRICE | EXTENDED PRICE |
|--------|--|----------|------|----------------|----------------|
| 1 | Replacement of Chillers at Health Dept. GL #: 55-4210-51-00-57401-42101 | 1.0000 | EACH | \$387,649.0000 | \$387,649.00 |

GL SUMMARY

55-4210-51-00-57401-42101

\$387,649.00

1. Shipments may be refused if the Purchase Order No. is not shown on Shipper or Bill of Lading. 2. Not exempt from State/Local and Federal Tax. 3. Substitutions will not be accepted without prior approval. 4. Partial shipments will be accepted if Invoiced separately. 5. C.O.D. or collect shipment will not be accepted. 6. Receiving hours are 0900 to 1600 Monday - Friday. This instrument has been preaudited in the manner required by the Local Government Budget and Fiscal Control Act. This document is governed by the provisions of NCGS, Chapter 25 Uniform Commercial Code Article 2, Sales.

Walter L. Kiss
Finance Director

John Henry
Purchasing Agent

Total Ext. Price \$387,649.00

Purchase Order Total \$387,649.00

**TRICK1 CUSTOMS INC. AUTOMOTIVE CENTER**

1924 Gastonia Hwy
Lincolnton, NC 28092-6411
Tel: 704-240-3590
trick1automotivecenter@gmail.com

RECEIVED

NOV 08 2023

NOV 08 2023

Invoice 1006543

Service Advisor: Mark Rhodes
Technician: Brandon Abree
Date: 10-31-2023
R/O: J007468

Customer Lincoln County Sheriffs Depart (LIN006)
700 John Howel Memorial Dr
Lincolnton NC 28092

*Work: 7044730773 Lester
trick1customs@gmail.com
Alternative Contact: Lester White

Vehicle 2018 Ford Police Interceptor Utility Base
3.7 FLEX
1FM5K8AR0JGA26632

Miles In: 111,673
Miles Out: 111,673
License Plate: 11807W NC

Customer Issues and Advisories**Work Description**

PO# 240079
Car #46
replace both converters

Work Performed**Parts**

| Parts | Part No | Qty | Price | Total |
|-------------------------------|----------|------|-------|-------|
| CAP COOLANT BOTTLE 1 EA CQSTA | CQS10238 | 1.00 | 11.29 | 11.29 |

Parts SubTotal \$11.29



Inv# 1006543
Trick 1 Customs, Inc
10/31/2023 # Pages 1
PO# 240079

\$ 1,764.16

FP1 D0C144S3364

aust
ides

| Tech | Hrs | Price | Total |
|------|------|-------|--------|
| | 2.30 | 75.00 | 172.50 |

| Parts | Part No | Qty | Price | Total |
|--|--------------|------|--------|--------|
| Catalytic Converter with Integrated Exhaust Manifold | DOR674-255 | 1.00 | 679.17 | 679.17 |
| Catalytic Converter with Integrated Exhaust Manifold | DOR674-256 | 1.00 | 699.58 | 699.58 |
| DOWN STREAM O2 | NAPNGK 22052 | 1.00 | 84.34 | 84.34 |

Parts SubTotal \$1,635.59

Total

1648.88
11-0000-00-00-14000 18.32
11-0000-00-00-14101 36.96

Labor 172.50
Parts 1,474.38
Hazmat* 0.00
Supplies* 2.00
Taxes 115.28

Invoice Total \$1,764.16

* Shop Supply & Hazmat Fees: This charge represents costs and profits (where applicable) to this repair facility for miscellaneous shop supplies, and/or waste removal

INV # 1006543 ENDOR # 3202
PURCHASE ORDER # 240079
ACCT # 10-52-00-52502 1,764.16

ACCT# _____ AMT _____

ACCT# _____ AMT _____

SHERIFF'S APPROVAL



Bill To 4310B
LINCOLN COUNTY SHERIFFS
OFFICE
PO BOX 506
Lincolnton, NC 28093

Vendor 3202
Trick 1 Customs, Inc
106 Eastview Dr
Lincolnton, NC 28092

Ship To
Lincoln County Sheriff Dept
700 John Howell Memorial Dr
Lincolnton, NC 28092

Purchase Order

Fiscal Year 2024 Page 1 of 1

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKAGES AND SHIPPING PAPERS.

Purchase Order Number 00240079
Purchase Order Date 07/06/2023
Department Sheriff
Required By 06/30/2024
Freight Terms net 30

Delivery must be made within doors of specified
destination.

| VENDOR PHONE NUMBER | VENDOR FAX NUMBER | VENDOR NUMBER | REQUISITION NUMBER | BUYER NAME | DELIVERY REFERENCE |
|---------------------|-------------------|---------------|--------------------|------------|--------------------|
| | | 3202 | 72 | John Henry | |

NOTES

| ITEM # | DESCRIPTION | QUANTITY | UOM | UNIT PRICE | EXTENDED PRICE |
|--------|--|----------|------|--------------|----------------|
| 1 | Blanket PO for repairs to vehicles GL #: 11-4310-52-00-52502- | 1.0000 | EACH | \$5,000.0000 | \$5,000.00 |

GL SUMMARY

11-4310-52-00-52502-

\$5,000.00

1. Shipments may be refused if the Purchase Order No. is not shown on Shipper or Bill of Lading 2. Not exempt from State/Local and Federal Tax 3. Substitutions will not be accepted without prior approval. 4. Partial shipments will be accepted if invoiced separately. 5. C.O.D. or collect shipment will not be accepted. 6. Receiving hours are 0900 to 1600 Monday - Friday. This instrument has been preaudited in the manner required by the Local Government Budget and Fiscal Control Act. This document is governed by the provisions of NCGS, Chapter 25 Uniform Commercial Code Article 2, Sales.

Finance Director

Purchasing Agent

Total Ext. Price \$5,000.00

Purchase Order Total \$5,000.00