



**Brown's Industrial Sales**

Highway 16 W & Range Road 20

P.O. Box 21092 Lloyd Mall

Lloydminster, AB T9V 2S1

780-875-2339 • Fax: 780-875-0262

**PLEASE REMIT TO:**

63214 Highway 892 • P.O. Box 1267

Cold Lake, AB T9M 1P3

780-826-2399 • Fax: 780-826-2390

Ship To: 51-044

Invoice To: INTERNAL - RENTAL - LLOYD  
15067 HWY 16W  
LLOYDMINSTER AB T9V 2S1

Branch		
LLOYDMINSTER		*REPRINT*
Date	Time	Page
02/19/23	18:02:44 (B)	01
Account No	Phone No	Inv No
INTRENT02		W01715
Ship Via	Purchase Order	
ORIG WO: W01673		
Tax Exempt ID No.		
	Salesperson	
	400	

**SERVICE INVOICE**

STK#/FLEET#		HRS	PIN/EIN	WARRANTY DATE	HRS
002007	ST31 COMPACT TRACK	1765	WNCS0506JPUM01587	07/28/23	2000 SW
51-044	ST31	1850	4907402660		

This order was created from order: W01673

SEGMENT# 1 C GEO01 NA 11/15/22 10/07/22

REPLACE SAFETY RELIEF VALVE

COMPLAINT:

HYDRAULIC SAFETY RELEASE VALVE LEAKING HYDRAULIC OIL

CAUSE:

CHECKED OVER UNIT, FOUND VALVE LEAKING OIL FROM ORING IN VALVE

CORRECTION:

Installed new safety relief valve.  
Reconnect all hydraulic lines.  
Check for proper operation.

1000340161	VALVE BYPASS	RETAIL	189.05	
		1 T	108.89	108.89
		PARTS		108.89
		LABOR		137.60
50210502		SEGMENT TOTAL==>		246.49

\*\*\*\*\* WORK ORDER TOTALS \*\*\*\*\*

	INTERNAL	CUSTOMER
PARTS	108.89	
LABOR	137.60	
SHOP SUPPLIES	6.88	
INTERNAL TOTAL	253.37	

**TERMS AND CONDITIONS**

I request the above work to be done and the above materials to be supplied and installed on the following conditions.

I promise to pay the amount due upon completion of the work. I acknowledge the lien of the operator for the value of the work and materials supplied. I authorize you, your agents, or independent contractors to drive my vehicle for the purpose of inspection and repairs. I authorize you to subcontract work as necessary, including releasing the vehicle or parts thereof to third parties. I will be responsible for any and all charges that any third party warranty company fails to pay for.

X

Authorized By