

UNITED STATES BANKRUPTCY COURT
DISTRICT OF DELAWARE

PROOF OF CLAIM

In re:

Case Number:

NOTE: See Reverse for List of Debtors/Case Numbers/ important details. This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor and Address: the person or other entity to who the debtor owes money or property

 20934399000990
NORTLAND REFRIGERATION SALES
& SERVICE INC
4908 BABBITT RD
NEW ALBANY, OH 43054

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

☒ Check this box if you are the debtor or trustee in this case.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number (614) 855-2245

Name and address where payment should be sent (if different from above):

RECEIVED

DEC 17 2009

BMC GROUP

☐ Check this box to indicate that this claim amends a previously filed claim.

Claim Number (see reverse):

Payment Telephone Number ()

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 4,150.30

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

☐ Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. BASIS FOR CLAIM:

Services Performed / Goods sold

(See instructions #2 and #3a on reverse side.)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:

3a. Debtor may have scheduled account as:

4. SECURED CLAIM

(See instruction #4 on reverse side.)

Secured Claim Amount: \$

Check the appropriate box if your claim is secured by a lien on property or a right of set off and provide the requested information

Nature of property or right of setoff:

☐ Real Estate ☐ Motor Vehicle ☐ Other

Unsecured Claim Amount: \$

Amount of arrearage and other charges at time case filed included in secured claim,

Value of Property: \$ Annual Interest Rate: % if any: \$ Basis for Perfection:

DO NOT include the priority portion of your claim here.

5. PRIORITY CLAIM

☐ Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

Unsecured Priority Claim Amount: \$

Include ONLY the priority portion of your unsecured claim here.

You MUST specify the priority of the claim:

- ☐ Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B)
- ☐ Wages, salaries, or commissions (up to \$10,950*), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).
- ☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).

☐ Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7).

☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a) ().

* Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. SUPPORTING DOCUMENTS: Attach redacted copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements. You may also attach a summary. Attach redacted copies of evidence of perfection of a security interest. (See definition of "redacted" on reverse side.) If the documents are not available, please explain.

DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before 4:00 pm, prevailing Eastern Time on December 15, 2009 for Non-Governmental Claimants OR on or before December 15, 2009 for Governmental Units.

THIS SPACE FOR COURT USE ONLY

BY MAIL TO:
Alset Owners, LLC, et al.
c/o BMC Group, Claims Processing
PO Box 3020
Chanhassen, MN 55317-3020

BY HAND OR OVERNIGHT DELIVERY TO:
Alset Owners, LLC, et al.
c/o BMC Group, Claims Processing
18750 Lake Drive East
Chanhassen, MN 55317

Alset Owners LLC

00174

DATE

12/9/09

SIGNATURE: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

Ed Potts Office Manager

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

ITEMS TO BE COMPLETED IN PROOF OF CLAIM FORM (IF NOT ALREADY PROPERLY FILLED IN)

Court, Name of Debtor, and Case Number:

Fill in the name of the federal judicial district where the bankruptcy case was filed, the name of the debtor in the bankruptcy case, and the bankruptcy case number. If you received a notice of the case from the Claims Agent, BMC Group, some or all of this information may have been already completed.

Debtor Name	Case No
Alset Owners, LLC	09-11960
Altes, LLC	09-11961
Checkers Michigan, LLC	09-11963
Setla, LLC	09-11962

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete item 4. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

4. Secured Claim:

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Supporting Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). Do not send original documents, as attachments may be destroyed after scanning.

Date-Stamped Copy and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

Return claim form and attachments, if any. If you wish to receive an acknowledgement of your claim, please enclose a self-addressed stamped envelope and a second copy of the proof of claim form with any attachments to the Claims Agent, BMC Group, at the address on the front of this form.

Please read – important information: upon completion of this claim form, you are certifying that the statements herein are true.

Be sure all items are answered on the claim form. If not applicable, insert "Not Applicable."

DEFINITIONS

DEBTOR

A debtor is the person, corporation, or other entity that has filed a bankruptcy case is called the debtor.

CREDITOR

A creditor is any person, corporation, or other entity to whom the debtor owed a debt on the date that the bankruptcy case was filed.

CLAIM

A claim is the creditor's right to receive payment on a debt that was owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

PROOF OF CLAIM

A form telling the bankruptcy court how much the debtor owed a creditor at the time the bankruptcy case was filed (the amount of the creditor's claim). This form must be filed with the court-appointed Claims Agent, BMC Group, at the address listed on the reverse side of this page

SECURED CLAIM Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors.

The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

UNSECURED NONPRIORITY CLAIM

If a claim is not a secured claim it is an unsecured claim. A claim may be partly secured and partly unsecured if the property on which a creditor has a lien is not worth enough to pay the creditor in full.

UNSECURED PRIORITY CLAIM Under 11 U.S.C. §507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other

document showing that the lien has been filed or recorded.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.), and any applicable orders of the bankruptcy court.

ONCE YOUR CLAIM IS FILED YOU CAN OBTAIN OR VERIFY YOUR CLAIM NUMBER BY VISITING www.bmcgroup.com

218189

4908 BABBITT ROAD
NEW ALBANY, OHIO 43054
(614) 855-2245 FAX (614) 855-2571
www.northlandrefrigeration.com
OH LIC. # 15047 P.O. # 60917

NAME	DATE	DATE ORDERED	DATE SCHEDULED
0 //	5/28/09		

(614) 855-2245 FAX (614) 855-2571
 www.northlandrefrigeration.com
 OH LIC. # 15047 P.O. # 60917
 E-MAIL

STREET	CITY	STATE	ZIP	PHONE
Kellys 800 Georgesville Rd	Georgesville	OH		
MAKE	MODEL	SERIAL NUMBER		
Columbus	5D0853W	110111693		
OB LOCATION			☐ WARRANTY ☐ CONTRACT ☐ SERVICE CONTRACT ☐ NORMAL ☐ RES ☐ COMM.	

ORIGINAL COMPLAINT	DESCRIPTION OF WORK	SERVICE
Ice was too thin and boat ^{up} & getting caught in curtain. curtain was staying open due to this, ice caught between approach & curtain. the Adjusted ice thickness probe to make thicker ice. Machine is operating normal now.		

TECH #	REGULAR		OVERTIME		CERT. #	TOTAL OTHER CHARGES
	HRS. @	/HR. =	HRS. @	/HR. =		
TECH #1	1	75				
TECH #2						
TECHNICIAN SIGNATURE						

TERMS: DUE UPON COMPLETION		HAVE THE AUTHORITY TO ORDER THE ABOVE WORK AND DO SO ORDER AS OUTLINED ABOVE. IT IS AGREED THAT THE SELLER WILL RETAIN TITLE TO ANY EQUIPMENT OR MATERIAL FURNISHED UNTIL FINAL & COMPLETE PAYMENT IS MADE, AND IF SETTLEMENT IS NOT MADE AS AGREED, THE SELLER SHALL HAVE THE RIGHT TO REMOVE SAME AND THE SELLER WILL BE HELD HARMLESS FOR ANY DAMAGES RESULTING FROM THE REMOVAL THEREOF. INVOICE PAYABLE UPON RECEIPT, 1 1/2% SERVICE CHARGE ADDED PER MONTH ON UNPAID BALANCE.	
AUTHORIZED SIGNATURE		RETURNED CHECKS ARE SUBJECT TO AN ADDITIONAL CHARGE OF \$26.00.	
DATE OF ORDER WORK HAS BEEN COMPLETED AND I ACKNOWLEDGE RECEIPT OF MY COPY.		DATE	
SUB-TOTAL		TOTAL AMOUNT DUE	
\$ 5.00		\$ 128.10	
TRIP CHARGE		\$ 40.00	
TAX		\$ 8.10	

CHECK LIST		QUANTITY	ITEM OR PART DESCRIPTION	PRICE	AMOUNT
☐	COMPRESSOR				
☐	CONDENSER COIL				
☐	EVAPORATOR COIL				
☐	REFRIGERANT				
☐	FAN AND MOTOR				
☐	ELECTRICAL CONNECTIONS				
☐	HEATING ASSY.				
☐	ELECTRICAL COMPLETS.				
☐	TRIP				
☐	CHARGE				
☐	BEARING				
☐	FLAME ADJUSTMENT				
☐	RELAY				
☐	CONTACTORS				
☐	OVERLOAD				
☐	PRESS. SWITCH				
☐	TEMPERATURE				
☐	OK				
☐	RELOCATE				
☐	REPLACE				
☐	STRIP HEAT				
☐	DEFROST CYCLE				
☐	BURNER & HEAT EXCHANGER				
☐	FUEL SUPPLY & PRESSURE				
☐	PILOT ASSEMBLY				
☐	FLAME ADJUSTMENT				
☐	PRIMARY RELAY & FLUE				
☐	FAN & LIMIT SWITCH OPER.				
☐	BLOWER ASSEMBLY				
☐	RV VALVE				
☐	STRIP HEAT				
☐	DEFROST CYCLE				
☐	ELECTRICAL COMPLETS.				
☐	RELAY				
☐	CONTACTORS				
☐	OVERLOAD				
☐	PRESS. SWITCH				
☐	TEMPERATURE				
☐	OK				
☐	RELOCATE				
☐	REPLACE				
☐	STRIP HEAT				
☐	DEFROST CYCLE				
☐	BURNER & HEAT EXCHANGER				
☐	FUEL SUPPLY & PRESSURE				
☐	PILOT ASSEMBLY				
☐	FLAME ADJUSTMENT				
☐	PRIMARY RELAY & FLUE				
☐	FAN & LIMIT SWITCH OPER.				
☐	BLOWER ASSEMBLY				
☐	RV VALVE				
☐	STRIP HEAT				
☐	DEFROST CYCLE				
☐	ELECTRICAL COMPLETS.				
☐	RELAY				
☐	CONTACTORS				
☐	OVERLOAD				
☐	PRESS. SWITCH				
☐	TEMPERATURE				
☐	OK				
☐	RELOCATE				
☐	REPLACE				
☐	STRIP HEAT				
☐	DEFROST CYCLE				
☐	BURNER & HEAT EXCHANGER				
☐	FUEL SUPPLY & PRESSURE				
☐	PILOT ASSEMBLY				
☐	FLAME ADJUSTMENT				
☐	PRIMARY RELAY & FLUE				
☐	FAN & LIMIT SWITCH OPER.				
☐	BLOWER ASSEMBLY				
☐	RV VALVE				
☐	STRIP HEAT				
☐	DEFROST CYCLE				
☐	ELECTRICAL COMPLETS.				
☐	RELAY				
☐	CONTACTORS				
☐	OVERLOAD				
☐	PRESS. SWITCH				
☐	TEMPERATURE				
☐	OK				
☐	RELOCATE				
☐	REPLACE				
☐	STRIP HEAT				
☐	DEFROST CYCLE				

CHECK LIST

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
COMPRESSOR 1. Suction ☐ 2. Head ☐ 3. Valve ☐ 4. Piston ☐ 5. Crankshaft ☐ 6. Connecting Rod ☐ 7. Oil Level ☐ 8. Oil Level ☐ 9. Oil Level ☐ 10. Oil Level ☐ 11. Oil Level ☐ 12. Oil Level ☐ 13. Oil Level ☐ 14. Oil Level ☐ 15. Oil Level ☐ 16. Oil Level ☐ 17. Oil Level ☐ 18. Oil Level ☐ 19. Oil Level ☐ 20. Oil Level ☐ 21. Oil Level ☐ 22. Oil Level ☐ 23. Oil Level ☐ 24. Oil Level ☐ 25. Oil Level ☐ 26. Oil Level ☐ 27. Oil Level ☐ 28. Oil Level ☐ 29. Oil Level ☐ 30. Oil Level ☐ 31. Oil Level ☐ 32. Oil Level ☐ 33. Oil Level ☐ 34. Oil Level ☐ 35. Oil Level ☐ 36. Oil Level ☐ 37. Oil Level ☐ 38. Oil Level ☐ 39. Oil Level ☐ 40. Oil Level ☐ 41. Oil Level ☐ 42. Oil Level ☐ 43. Oil Level ☐ 44. Oil Level ☐ 45. Oil Level ☐ 46. Oil Level ☐ 47. Oil Level ☐ 48. Oil Level ☐ 49. Oil Level ☐ 50. Oil Level ☐ 51. Oil Level ☐ 52. Oil Level ☐ 53. Oil Level ☐ 54. Oil Level ☐ 55. Oil Level ☐ 56. Oil Level ☐ 57. Oil Level ☐ 58. Oil Level ☐ 59. Oil Level ☐ 60. Oil Level ☐ 61. Oil Level ☐ 62. Oil Level ☐ 63. Oil Level ☐ 64. Oil Level ☐ 65. Oil Level ☐ 66. Oil Level ☐ 67. Oil Level ☐ 68. Oil Level ☐ 69. Oil Level ☐ 70. Oil Level ☐ 71. Oil Level ☐ 72. Oil Level ☐ 73. Oil Level ☐ 74. Oil Level ☐ 75. Oil Level ☐ 76. Oil Level ☐ 77. Oil Level ☐ 78. Oil Level ☐ 79. Oil Level ☐ 80. Oil Level ☐ 81. Oil Level ☐ 82. Oil Level ☐ 83. Oil Level ☐ 84. Oil Level ☐ 85. Oil Level ☐ 86. Oil Level ☐ 87. Oil Level ☐ 88. Oil Level ☐ 89. Oil Level ☐ 90. Oil Level ☐ 91. Oil Level ☐ 92. Oil Level ☐ 93. Oil Level ☐ 94. Oil Level ☐ 95. Oil Level ☐ 96. Oil Level ☐ 97. Oil Level ☐ 98. Oil Level ☐ 99. Oil Level ☐ 100. Oil Level ☐ CONDENSER COIL 1. Clean Coil ☐ 2. Check Fan Cond ☐ 3. ENT WB ☐ 4. ENT DB ☐ 5. ENT WB ☐ 6. ENT DB ☐ 7. LUG WB ☐ 8. LUG DB ☐ 9. LUG WB ☐ 10. LUG DB ☐ 11. LUG WB ☐ 12. LUG DB ☐ 13. LUG WB ☐ 14. LUG DB ☐ 15. LUG WB ☐ 16. LUG DB ☐ 17. LUG WB ☐ 18. LUG DB ☐ 19. LUG WB ☐ 20. LUG DB ☐ 21. LUG WB ☐ 22. LUG DB ☐ 23. LUG WB ☐ 24. LUG DB ☐ 25. LUG WB ☐ 26. LUG DB ☐ 27. LUG WB ☐ 28. LUG DB ☐ 29. LUG WB ☐ 30. LUG DB ☐ 31. LUG WB ☐ 32. LUG DB ☐ 33. LUG WB ☐ 34. LUG DB ☐ 35. LUG WB ☐ 36. LUG DB ☐ 37. LUG WB ☐ 38. LUG DB ☐ 39. LUG WB ☐ 40. LUG DB ☐ 41. LUG WB ☐ 42. LUG DB ☐ 43. LUG WB ☐ 44. LUG DB ☐ 45. LUG WB ☐ 46. LUG DB ☐ 47. LUG WB ☐ 48. LUG DB ☐ 49. LUG WB ☐ 50. LUG DB ☐ 51. LUG WB ☐ 52. LUG DB ☐ 53. LUG WB ☐ 54. LUG DB ☐ 55. LUG WB ☐ 56. LUG DB ☐ 57. LUG WB ☐ 58. LUG DB ☐ 59. LUG WB ☐ 60. LUG DB ☐ 61. LUG WB ☐ 62. LUG DB ☐ 63. LUG WB ☐ 64. LUG DB ☐ 65. LUG WB ☐ 66. LUG DB ☐ 67. LUG WB ☐ 68. LUG DB ☐ 69. LUG WB ☐ 70. LUG DB ☐ 71. LUG WB ☐ 72. LUG DB ☐ 73. LUG WB ☐ 74. LUG DB ☐ 75. LUG WB ☐ 76. LUG DB ☐ 77. LUG WB ☐ 78. LUG DB ☐ 79. LUG WB ☐ 80. LUG DB ☐ 81. LUG WB ☐ 82. LUG DB ☐ 83. LUG WB ☐ 84. LUG DB ☐ 85. LUG WB ☐ 86. LUG DB ☐ 87. LUG WB ☐ 88. LUG DB ☐ 89. LUG WB ☐ 90. LUG DB ☐ 91. LUG WB ☐ 92. LUG DB ☐ 93. LUG WB ☐ 94. LUG DB ☐ 95. LUG WB ☐ 96. LUG DB ☐ 97. LUG WB ☐ 98. LUG DB ☐ 99. LUG WB ☐ 100. LUG DB ☐ REFRIGERANT 1. LEAK ☐ 2. CHARGE ☐ 3. VOLT ☐ 4. AMP ☐ 5. VOLT ☐ 6. AMP ☐ 7. VOLT ☐ 8. AMP ☐ 9. VOLT ☐ 10. AMP ☐ 11. VOLT ☐ 12. AMP ☐ 13. VOLT ☐ 14. AMP ☐ 15. VOLT ☐ 16. AMP ☐ 17. VOLT ☐ 18. AMP ☐ 19. VOLT ☐ 20. AMP ☐ 21. VOLT ☐ 22. AMP ☐ 23. VOLT ☐ 24. AMP ☐ 25. VOLT ☐ 26. AMP ☐ 27. VOLT ☐ 28. AMP ☐ 29. VOLT ☐ 30. AMP ☐ 31. VOLT ☐ 32. AMP ☐ 33. VOLT ☐ 34. AMP ☐ 35. VOLT ☐ 36. AMP ☐ 37. VOLT ☐ 38. AMP ☐ 39. VOLT ☐ 40. AMP ☐ 41. VOLT ☐ 42. AMP ☐ 43. VOLT ☐ 44. AMP ☐ 45. VOLT ☐ 46. AMP ☐ 47. VOLT ☐ 48. AMP ☐ 49. VOLT ☐ 50. AMP ☐ 51. VOLT ☐ 52. AMP ☐ 53. VOLT ☐ 54. AMP ☐ 55. VOLT ☐ 56. AMP ☐ 57. VOLT ☐ 58. AMP ☐ 59. VOLT ☐ 60. AMP ☐ 61. VOLT ☐ 62. AMP ☐ 63. VOLT ☐ 64. AMP ☐ 65. VOLT ☐ 66. AMP																																																																																																			

TRAVEL TIME					
	TIME	ARRIVED			
	TIME	DEPARTED			
	TRAVEL				
	TIME				
MILEAGE					
	ENDING				
	START -				
	TOTAL	MILES			
	X	HR.			
	X	MIN.			
TRIP CHARGE \$					

[illegible]

NORTHLAND REFRIGERATION SALES & SERVICE, INC.					
4908 BABBITT ROAD NEW ALBANY OHIO 43054 (614) 855-2245 FAX (614) 855-2571 www.NorthlandRefrigeration.com OH LIC. # 15047 P.O. # 59936					
NAME	Rally's	CITY	STATE	ZIP	
STREET	6101 E. Main St.	MAKE	MODEL	SERIAL NUMBER	
JOB LOCATION					
ORIGINAL COMPLAINT	DESCRIPTION OF WORK				
Cleaned condenser coils on roof by air. Coils were very dirty cleaned with coil cleaners and thoroughly rinsed out with hoses. Replaced cleaning only every spring tax sell.					
TECH #1	HRS @ \$75 /HR =	REGULAR	OVERTIME	HRS. @ /HR =	\$75.00
TECH #2	HRS. @ /HR =	REGULAR	OVERTIME	HRS. @ /HR =	
TECHNICIAN SIGNATURE	CERT. #		TOTAL OTHER CHARGES		
TERMS: DUE UPON COMPLETION			SUB-TOTAL		
I HAVE THE AUTHORITY TO ORDER THE ABOVE WORK AND DO SO ORDER AS OUTLINED ABOVE. IT IS AGREED THAT THE SELLER WILL RETAIN TITLE TO ANY EQUIPMENT OR MATERIAL FURNISHED UNTIL FINAL & COMPLETE PAYMENT IS MADE, AND IF SETTLEMENT IS NOT MADE AS AGREED, THE SELLER SHALL HAVE THE RIGHT TO REMOVE SAME AND THE SELLER WILL BE HELD HARMLESS FOR ANY DAMAGES RESULTING FROM THE REMOVAL THEREOF. INVOICE PAYABLE UPON RECEIPT. 1 MONTH ON UNPAID BALANCE.			\$135.00		
RETURNED CHECKS ARE SUBJECT TO AN ADDITIONAL CHARGE OF \$26.00.			TRIP CHARGE		
			\$3.00		
			TAX		
			\$4.00		
			TOTAL AMOUNT DUE		
			\$180.00		
AUTHORIZED SIGNATURE			DATE		
above ordered work has been completed and I acknowledge receipt of my copy.			DATE		

CHECK LIST

☐ COMPRESSOR	☐ EVAPORATOR COIL	☐ CONDENSATE AREAS	☐ ELECTRICAL COMPTS
☐ SUCTION	☐ CLEAN COIL & CHECK FIN	☐ INSPECT & CLEAN DRAIN	☐ DEFROST CYCLE
☐ HEAD	☐ ENT DB	☐ AIR FILTERS	☐ ELECTRICAL COMPTS
☐ VOLT	☐ ENT WB	☐ CLEANED ☐ REPLACED	☐ RELAYS ☐ CONTACTORS
☐ VOLT	☐ ENT LG	☐ FILTER SIZE	☐ OVERLOAD ☐ PRESS. SWITCH
☐ ELECTRICAL CONNECTIONS	☐ LEAK ☐ CHARGE	☐ BURNER & HEAT EXCHANGER	☐ THERMOSTAT
☐ CONTACTS TIGHT & CLEAN	☐ FAN AND MOTOR	☐ FUEL SUPPLY & PRESSURE	☐ O.K. ☐ REPLACE
☐ OIL LEVEL & CONDITION	☐ ELECTRICAL CONNECTIONS	☐ PILOT ASSEMBLY	☐ RELOCATE
☐ CONDENSER COIL	☐ CONTACTS TIGHT & CLEAN	☐ FRAME ADJUSTMENT	
☐ CLEAN COIL & CHECK FIN COND	☐ FAN PULLEY'S (ADJUST BELT)	☐ PRIMARY RELAY & FLUE	
☐ ENT DB	☐ CHECK (OIL BEARINGS & MOTOR	☐ FAN LIMIT SWITCH OPER	
☐ ENT LG	☐ CFM	☐ BLOWER ASSEMBLY	
☐ REFRIGERANT	☐ EVAPORATOR COIL	☐ RV VALVE	
☐ LEAK ☐ CHARGE	☐ CLEAN COIL & CHECK FIN	☐ STRIP HEAT	
☐ FAN AND MOTOR	☐ ENT DB	☐ CONDENSATE AREAS	
☐ ELECTRICAL CONNECTIONS	☐ ENT WB	☐ AIR FILTERS	
☐ CONTACTS TIGHT & CLEAN	☐ ENT LG	☐ CLEANED ☐ REPLACED	
☐ OIL LEVEL & CONDITION	☐ CONDENSATE AREAS	☐ INSPECT & CLEAN DRAIN	
☐ CONDENSER COIL	☐ CONDENSATE AREAS	☐ ELECTRICAL COMPTS	
☐ CLEAN COIL & CHECK FIN COND	☐ CONDENSATE AREAS	☐ RELAYS ☐ CONTACTORS	
☐ ENT DB	☐ CONDENSATE AREAS	☐ OVERLOAD ☐ PRESS. SWITCH	
☐ ENT LG	☐ CONDENSATE AREAS	☐ THERMOSTAT	
☐ REFRIGERANT	☐ CONDENSATE AREAS	☐ O.K. ☐ REPLACE	
☐ LEAK ☐ CHARGE	☐ CONDENSATE AREAS	☐ RELOCATE	
☐ FAN AND MOTOR	☐ CONDENSATE AREAS		
☐ ELECTRICAL CONNECTIONS	☐ CONDENSATE AREAS		
☐ CONTACTS TIGHT & CLEAN	☐ CONDENSATE AREAS		
☐ OIL LEVEL & CONDITION	☐ CONDENSATE AREAS		
☐ CONDENSER COIL	☐ CONDENSATE AREAS		
☐ CLEAN COIL & CHECK FIN COND	☐ CONDENSATE AREAS		
☐ ENT DB	☐ CONDENSATE AREAS		
☐ ENT LG	☐ CONDENSATE AREAS		
☐ REFRIGERANT	☐ CONDENSATE AREAS		
☐ LEAK ☐ CHARGE	☐ CONDENSATE AREAS		
☐ FAN AND MOTOR	☐ CONDENSATE AREAS		
☐ ELECTRICAL CONNECTIONS	☐ CONDENSATE AREAS		
☐ CONTACTS TIGHT & CLEAN	☐ CONDENSATE AREAS		
☐ OIL LEVEL & CONDITION	☐ CONDENSATE AREAS		
☐ CONDENSER COIL	☐ CONDENSATE AREAS		
☐ CLEAN COIL & CHECK FIN COND	☐ CONDENSATE AREAS		
☐ ENT DB	☐ CONDENSATE AREAS		
☐ ENT LG	☐ CONDENSATE AREAS		
☐ REFRIGERANT	☐ CONDENSATE AREAS		
☐ LEAK ☐ CHARGE	☐ CONDENSATE AREAS		
☐ FAN AND MOTOR	☐ CONDENSATE AREAS		
☐ ELECTRICAL CONNECTIONS	☐ CONDENSATE AREAS		
☐ CONTACTS TIGHT & CLEAN	☐ CONDENSATE AREAS		
☐ OIL LEVEL & CONDITION	☐ CONDENSATE AREAS		
☐ CONDENSER COIL	☐ CONDENSATE AREAS		
☐ CLEAN COIL & CHECK FIN COND	☐ CONDENSATE AREAS		
☐ ENT DB	☐ CONDENSATE AREAS		
☐ ENT LG	☐ CONDENSATE AREAS		
☐ REFRIGERANT	☐ CONDENSATE AREAS		
☐ LEAK ☐ CHARGE	☐ CONDENSATE AREAS		
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☐ REFRIGERANT	☐ CONDENSATE AREAS		
☐ LEAK ☐ CHARGE	☐ CONDENSATE AREAS		
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☐ CONDENSER COIL	☐ CONDENSATE AREAS		
☐ CLEAN COIL & CHECK FIN COND	☐ CONDENSATE AREAS		
☐ ENT DB	☐ CONDENSATE AREAS		
☐ ENT LG	☐ CONDENSATE AREAS		
☐ REFRIGERANT	☐ CONDENSATE AREAS		
☐ LEAK ☐ CHARGE	☐ CONDENSATE AREAS		

TRAVEL TIME

TIME ARRIVED _____

TIME DEPARTED _____

TRAVEL TIME _____

MILEAGE	
ENDING	
START--	
TOTAL MILES	
X	/HR.=
X	/MI.=
TRIP	
CHARGE \$	

QUANTITY	ITEM OR PART DESCRIPTION	PRICE	AMOUNT
	Cool Cleaner	\$75.00	
	RETROFIT APPLIED		
	REFRIGERANT ADDED		
	TOTAL PARTS	\$75.00	

WRITE OR CODE	AMOUNT
CL	
LA	
RG	
ES	
FR	
OM	REFER MACH. USAGE
BE	
TOTAL	\$
OTHER CHARGES	
OW	

ENVIRONMENT		CHECK		LIST	
TYPE	SYSTEM	QTY.	QTY.	QTY.	QTY.
CHRG. CODE	REFRIG.	QTY.	QTY.	QTY.	QTY.
①	RECOVERED?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
②	RECYCLED?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
③	RECLAIMED?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
④	RETURNED TO THIS SYSTEM?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
⑤	DISPOSAL	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
⑥	NON USEABLE	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
⑦	DISPOSAL	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO

REG. NO. TX 3 659 192

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OUR PERSONNEL RECOMMEND:

OWNER'S INITIALS
ACCEPTED DECLINED

NORTHLAND REFRIGERATION SALES & SERVICE, INC.		218281	
4908 BABBITT ROAD NEW ALBANY, OHIO 43054 (614) 855-2245 FAX (614) 855-2571 www.northlandrefrigeration.com OH LIC. # 15047 P.O. # 60944			
NAME	Rally's	E-MAIL	
STREET	6101 E. Main St	DATE ORDERED	6/18/09
CITY	Columbus	STATE	OH
MAKE	Beko	MODEL	ETOSSIF
SERIAL NUMBER	D04E231	WARRANTY	☐
ZIP		CONTRACT	☐
JOB LOCATION		SERVICE CONTRACT	☒ NORMAL
DESCRIPTION OF WORK	☐ RES ☒ COMM. ☐ SERVICE		
ORIGINAL COMPLAINT	Unit Freezer was running. It was tripped on head pressure control due to an extremely dirty condenser. Cleaned condenser & re-set control. Sight glass is full.		
TECH #1	HRS. @ 75	OVERTIME HRS. @	
TECH #2	HRS. @	OVERTIME HRS. @	\$ 75.00
TECHNICIAN SIGNATURE	M. J. D.		
TERMS: DUE UPON COMPLETION			
I HAVE THE AUTHORITY TO ORDER THE ABOVE WORK AND DO SO ORDER AS OUTLINED ABOVE. IT IS AGREED THAT THE SELLER WILL RETAIN TITLE TO ANY EQUIPMENT OR MATERIAL FURNISHED UNTIL FINAL & COMPLETE PAYMENT IS MADE, AND IF SETTLEMENT IS NOT MADE AS AGREED, THE SELLER SHALL HAVE THE RIGHT TO REMOVE SAME AND THE SELLER WILL BE HELD HARMLESS FOR ANY DAMAGES RESULTING FROM THE REMOVAL THEREOF. INVOICE PAYABLE UPON RECEIPT. 1 % SERVICE CHARGE ADDED PER MONTH ON UNPAID BALANCE.			
RETURNED CHECKS ARE SUBJECT TO AN ADDITIONAL CHARGE OF \$26.00.			
AUTHORIZED SIGNATURE	X Michael (Signature)		
TOTAL AMOUNT DUE	\$ 154.79		

