

CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: 1201 Hillside Ave Date of Visit: 11/15/19 & 12/8/19

Contractor Personnel on Site:

1. Jim Phillips
2. Sean Travis
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. Lubrication of locks
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Inspection, Testing, and Certification

1. Tested all locks we serviced.
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Other Recurring Services

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Service Calls – Service Call Number and Description

1. 2 service calls for lock work
2. \_\_\_\_\_
3. \_\_\_\_\_

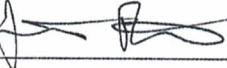
Over and Above Repair Work – Order Number and Description of Work Completed

Work order # - 6051, CCS # 18782  
- Repaired crash bar & lever trim on door 138, rekeyed 3 cores on doors 148, 102, 228. Provided 12 duplications of Best keys. Inspected & lubricated locks on doors 145, 106 and main door to 413 bldpenn.

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: James Phillips Date: 12/19/19  
Signed: 

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: Michael Moseman Date: 1/06/2020  
Signed: 

E-Mail: Michael.moseman.ctr@mail.mil