

WO# 21-0010402

ATTACHMENT J-0200000-05  
FORMS

CERTIFICATION OF WORK

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

FACID/Building: <sup>Ny 054.</sup> US Army Reserve Platts. Date of Visit: 10-18-2021

Contractor Personnel on Site:

- |                         |          |
|-------------------------|----------|
| 1. <u>Paul Williams</u> | 4. _____ |
| 2. _____                | 5. _____ |
| 3. _____                | 6. _____ |

Work Performed:

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

- |          |
|----------|
| 1. _____ |
| 2. _____ |
| 3. _____ |
| 4. _____ |

Inspection, Testing, and Certification

- |          |
|----------|
| 1. _____ |
| 2. _____ |
| 3. _____ |
| 4. _____ |

Other Recurring Services

- |          |
|----------|
| 1. _____ |
| 2. _____ |
| 3. _____ |
| 4. _____ |

Service Calls - Service Call Number and Description

- |   |
|---|
| 1. <u>Leaky Hot Dogs comfort heater leaking = Tightened fittings.</u> |
| 2. <u>Recommend replacing unit due to</u>                             |
| 3. <u>corrosion!</u>  |

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

*[This section contains several horizontal lines for text entry, which have been crossed out with a large diagonal line.]*

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Paul Williams Date: 10-15-2021

Signed: *[Signature]*

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: Sgt. [Signature] Joshua Date: 20211019

Signed: *[Signature]*

E-Mail: JOSHUA D. GRIFFIN29.MIL@ARMY.MIL