

183149UP

### CERTIFICATION OF WORK

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

FACID/Building: \_\_\_\_\_

Date of Visit: 6/11/18

Contractor Personnel on Site:

1. Jim M'Elhenny 2. \_\_\_\_\_

#### Work Performed:

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

1. WO# 2397 Asset # 7172 Serial # 18759

#### Service Calls – Service Call Number and Description

1. CSS# 13735 Replaced #1 check valve, cleaned, retested-Pas 3
2. CSS# \_\_\_\_\_
3. CSS# \_\_\_\_\_

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### CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim M'Elhenny Date: 6/11/18

Signed: Jim M'Elhenny

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: Kassandra Ellis /SGT Date: 20180611

Signed: XQD

E-Mail: Kassandra.1.ellis.civ@mail.mil

OVERFLOW PREVENTER TEST

LEADS

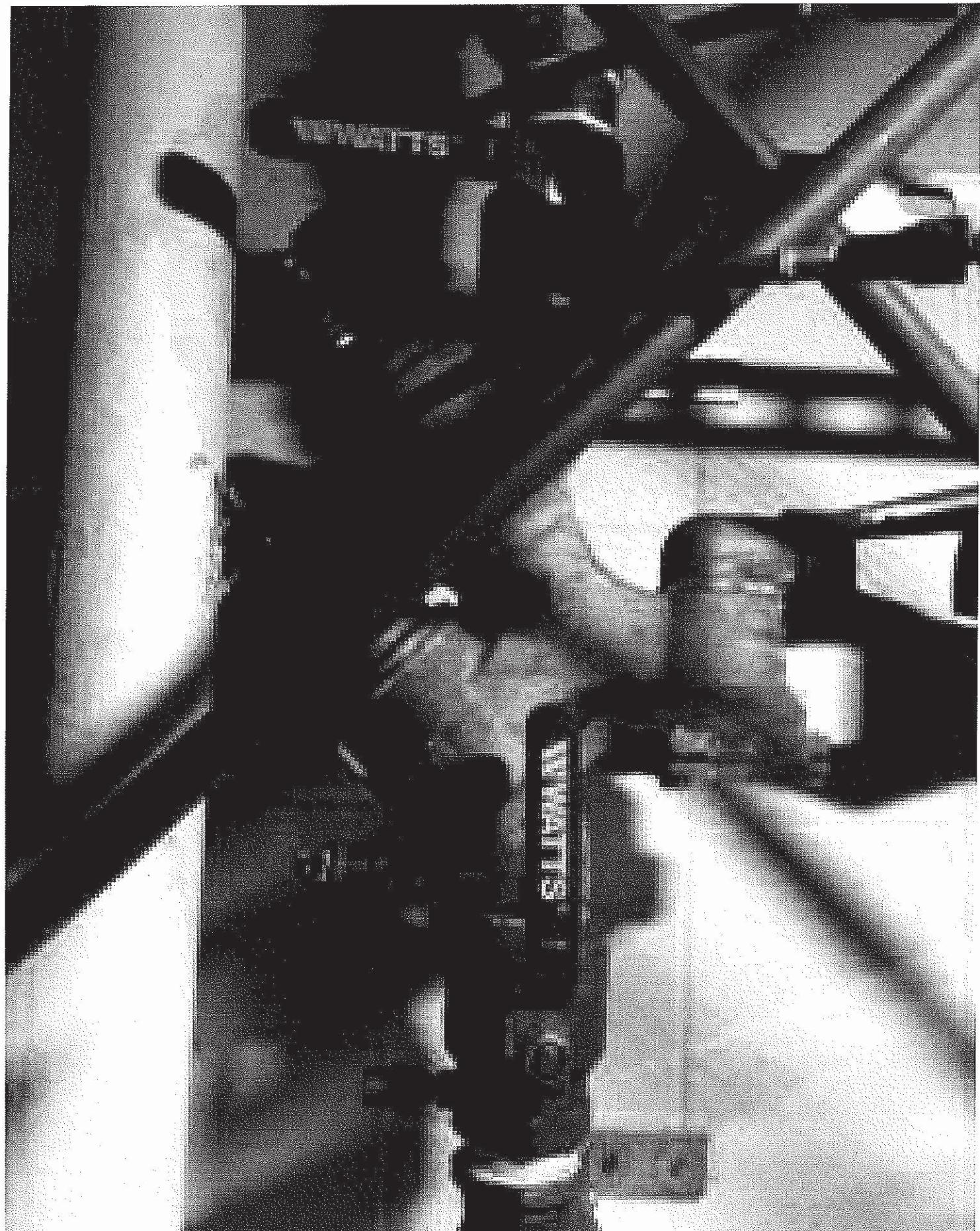
TOP

4.575

2

42.29

4.575





ALL  
CARS  
WILL  
GET  
MAINTENANCE  
RECORD

CHI MGT. INC.  
DATE

BY

2-10-10 - Fixed  
4/20/14

Failure S.  
Tire