

**CERTIFICATION OF WORK**  
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: \_\_\_\_\_ Date of Visit: 30 Nov 18

**Contractor Personnel on Site:**

1. Dave Epler
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
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. Replace Bearing Assy Pump 44
2. Check wiring for H.O.A. switch -Bad switch Replaced.
3. \_\_\_\_\_

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

Reported Bad motor pump 4 was in fact Bearing assy - Replaced Hand off Auto switch - mess wired Found Bad switch - Replaced and in hand wire no power - Repaired

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: DAve Epler Date: 30 Nov 18  
Signed: D Epler

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 Berry Jody Date: 2018/12/05  
Signed: Jody Pro  
E-Mail: Jody.Berry.mil@mail.mil