

**ATTACHMENT J-0200000-05  
FORMS**

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

## **CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Jesse Selman Date: 1/17/2019  
Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: SGT TABITHA K. SPANGLER Date: 20190117

Signed: SPANGLER.TABITHA.KAY.13 79044219 Digitally signed by SPANGLER.TABITHA.KAY.13.1379044219 Date: 2019.01.17 10:07:57 -05'00'

E-Mail: TABITHA.K.SPANGLER.MIL@MAIL.MIL

CERTIFICATION OF WORK

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

FACID/Building: PAOII

Date of Visit: 1/17/2019

Contractor Personnel on Site:

1. Jesse Selman
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**

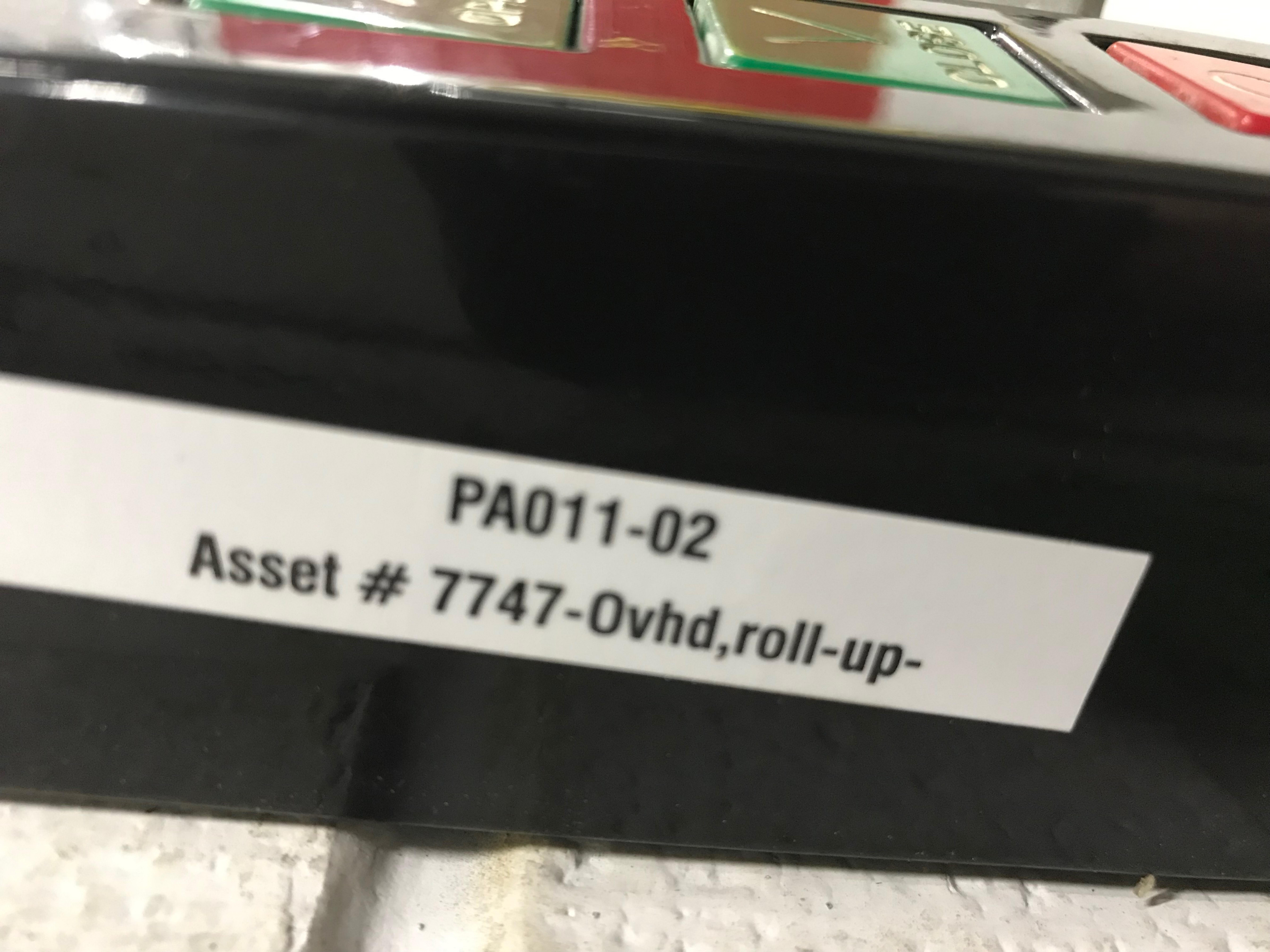
1. Initial visit, investigative
2. \_\_\_\_\_
3. \_\_\_\_\_

**PA011-02**

**Asset # 7776-Ovhd,roll-up-**







PA011-02  
Asset # 7747-Ovhd,roll-up-



