

*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 time line:

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

Building: NY023-124 _____ Date of Visit: 7/15/19 _____

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed:

Preventive Maintenance - (Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders -

PM/SO	WO #	Asset #	PM #	Asset Description
	4385	9393	PM-AN-9393	J-26 2-pc Toilet, Flush Valve, Wall Mounted Rm 1005
	4386	9394	PM-AN-9394	J-26 2-pc Lavatory, Wall Mounted Rm 1005
	4387	9395	PM-AN-9395	J-26 1-pc Toilet, Flush Valve, Wall Mounted Rm 1006
	4388	9396	PM-AN-9396	J-26 1-pc Urinal, Wet, Flush Valve Rm 1006
	4389	9397	PM-AN-9397	J-26 2-pc Lavatory, Wall Mounted Rm 1006
	4669	9403	PM-SA-9403	J-56 1-pc Overhead Door, Steel, Roll Up, 8Wx8H

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Michael Waller Date: 7/15/19
Signed: Michael Waller

To be signed by Facility Manager:

Print Name/Rank: Daniel L. Baker Date: 7/15/19
Signed: Daniel L. Baker

E-Mail: _____