

*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: NY023-206 _____ Date of Visit: 9/17/19

Contractor Personnel on Site:

1. TSG 2. _____

Work Performed:

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

| PM/SO | WO # | Asset # | PM # | Asset Description |
|-------|------|---------|------|--------------------------------------|
| | 5202 | 9497 | | J-09 49-pc PTAC PA |
| | 5293 | 9522 | | J-31 1-pc Sump Pump, Electric Rm B08 |
| | 5421 | 9497 | | J-09 49-pc PTAC PA |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Michael Wolff Date: 9/17/19

Signed: Michael Wolff

To be signed by Facility Manager:

Print Name/Rank: _____ Date: 9/17/19

Signed: [Signature]

E-Mail: _____