

*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: NY023-319 _____

Date of Visit: 7/2/19

Contractor Personnel on Site:

1. Mike Wolfe 2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
	4424	9539	PM-AN-9539	J-26 3-pc Toilet, Flush Valve, Floor Mounted Rm A010
	4425	9540	PM-AN-9540	J-26 3-pc Lavatory, Wall Mounted Rm A010
	4426	9541	PM-AN-9541	J-26 3-pc Urinal, Wet, Flush Valve Rm A010
	4427	9542	PM-AN-9542	J-26 2-pc Shower, Built-In Rm A010
	4428	9543	PM-AN-9543	J-26 3-pc Lavatory, Wall Mounted Rm 1008
	4429	9544	PM-AN-9544	J-26 2-pc Shower, Built-In Rm 1008
	4430	9545	PM-AN-9545	J-26 2-pc Toilet, Flush Valve, Floor Mounted Rm 1008

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Mike Wolfe Date: 7/2/19

Signed: Mike Wolfe

To be signed by Facility Manager:

Print Name/Rank: David Loh Date: 7/2/19

Signed: David Loh

E-Mail: _____