

*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: NY058-02 _____

Date of Visit: 9/25/19

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
	5161	10144		J-04 1-pc Air Handler
	5162	10145		J-04 1-pc Air Handler
	5163	10150		J-06 1-pc Fuel Oil Booster Pump for Furnace
	5271	10202		J-57 3-pc Overhead Exhaust System
	5311	10144		J-04 1-pc Air Handler
	5312	10145		J-04 1-pc Air Handler
	5313	10146		J-04 1-pc Variable Frequency Drive
	5314	10147		J-04 1-pc Variable Frequency Drive
	5315	10148		J-04 1-pc Condensing Unit
	5316	10149		J-04 1-pc Condensing Unit
	5317	10150		J-06 1-pc Fuel Oil Booster Pump for Furnace

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Mark W. Wolfe Date: 9/25/19
Signed: Mark W. Wolfe

To be signed by Facility Manager:

Print Name/Rank: SPC Michael A. Sison Date: 9/25/19
Signed: M. Sison

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E-Mail: _____