

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

FACID/Building: NY060 CSS 26032 Date of Visit: 10/14/12

Contractor Personnel on Site:

1. Adam Secord
2. Tim Slous
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. Tested HP 2-26 For Leaks
2. _____
3. _____
4. _____

Other Recurring Services

1. _____
2. _____
3. _____
4. _____

Service Calls – Service Call Number and Description

1. W09750 → Leak Search Heat Pump #2-26
2. _____
3. _____

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

Pulled HP 2-26 From Ceiling
Found leak, repaired leak,
Recharged unit w/refrigerant R-410a
Verified unit operating upon completion

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Timothy Robbins Date: 10/14/20
Signed: Timothy Robbins

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: Michael Moseman Date: 10/14/20
Signed: Michael Moseman
E-Mail: Michael.Moseman.ctr.mail.mi/