

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: P0053-02 Date of Visit: 3-14-19, 3-15-19

Contractor Personnel on Site:

1. Dominic Stango
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Work Performed:**

**Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)**

1. wo# 7676, 7869, 8034 7844,
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Dominic Stango Date: 3-27-19

Signed: [Signature]

To be signed by Facility Manager:

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 timeline:

Print Name/Rank: Alvyn M. Lewis Date: 3/27/19

Signed: [Signature]

E-Mail: \_\_\_\_\_