

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: Pa 166-01 Date of Visit: 5-15-19

Contractor Personnel on Site:

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

**Work Performed:**

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

1. W0# 8474, 8612, 8744  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_

---

**CERTIFICATION OF WORK**

To be signed by the Contractor:

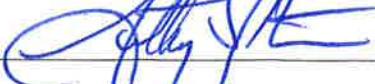
Print Name: Dominic Stango Date: 5-29-19

Signed: 

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: Timothy S PETERS Date: 29 MAY 19

Signed: 

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

## CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: Pa166-02 Date of Visit: 5-22-19

Contractor Personnel on Site:

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

**Work Performed:**

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

1. WOT# 8798, 3400, 3420, 34 8533.
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

---

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Dominic Stango Date: 5-29-19

Signed: 

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: Timothy S Peters Date: 29 MAY 19

Signed: 

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

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: Pa166-03

Date of Visit: 5-29-19

Contractor Personnel on Site:

1. <u>Dominic Stango</u>	3. _____
2. _____	4. _____

**Work Performed:**

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

1. <u>WOT 8510, 8693, 871</u>	2. _____
3. _____	4. _____
5. _____	_____

**CERTIFICATION OF WORK**

To be signed by the Contractor:

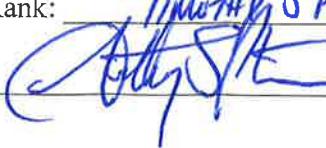
Print Name: Dominic Stango Date: 5-29-19

Signed: 

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: Timothy S PETERS Date: 29MAY19

Signed: 

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

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: Da166 -05 Date of Visit: 5-29-19

Contractor Personnel on Site:

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

**Work Performed:**

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

1. W011848718715  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_

---

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Dominic Stango Date: 5-29-19

Signed: 

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: Timothy S Peters Date: 29 MAY 19

Signed: 

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

## CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: Pa16-6B Date of Visit: 5-29-19

Contractor Personnel on Site:

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

### Work Performed:

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

1. WB# 8553,8609
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

---

---

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

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: THOMAS PETERS Date: 29 MAY 19

Signed: Thomas Peters

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