

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:

CERTIFICATION OF WORK

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

FACID/Building: VA099-01 _____ Date of Visit: 1/16/19

Contractor Personnel on Site:

1. Troy CRAIG 2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
	7139	2378	PM-SA-2378	J-1502000-52 1-pc Overhead Door, Steel, Roll Up, 10Wx10H
	7139	2379	PM-SA-2378	J-1502000-53 1-pc Auto Access Control
	7139	2381	PM-SA-2378	J-1502000-56 1-pc Rollup Kitchen Service Door 10ftW x 5ftH
	7139	2382	PM-SA-2378	J-1502000-56 1-pc Rollup Kitchen Service Door 4ftW x 5ftH
	7140	2392	PM-SA-2392	J-1502000-52 3-pc Overhead Door, Steel, Roll Up, 24Wx14H
	7141	2393	PM-SA-2393	J-1502000-52 2-pc Overhead Door, Steel, Roll Up, 10Wx8H
	7092	1465	PM-MO-1465	J-1502000-49 1-pc Automatic Gate 2013 Sgl Gate, Auto, Cantilever Road to motor pool
	7093	1467	PM-MO-1467	J-1502000-45 6-pc Double Light, Pole Mounted
	7093	1466	PM-MO-1467	J-1502000-45 14-pc Single Light, Pole Mounted
	7139	2378	PM-SA-2378	J-1502000-52 1-pc Overhead Door, Steel, Roll Up, 10Wx10H

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Troy CRAIG Date: 1/16/19

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:

Signed: Tom Ai

To be signed by Facility Manager:

Print Name/Rank: _____ Date: _____

Signed: Shirrell

E-Mail: _____