

*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: VA009-01 _____ Date of Visit: 4/2/19

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
	8226	1365	PM-AN-1370	J-1502000-17 6-pc Thermostat, AnalogRooms 131,117, 115, 114,109, 108
	8226	1366	PM-AN-1370	J-1502000-17 1-pc Thermostat, AnalogRM 130
	8226	1367	PM-AN-1370	J-1502000-17 1-pc Thermostat, AnalogRM 130
	8226	1368	PM-AN-1370	J-1502000-17 3-pc Thermostat, DigitalRooms 129A, 129B, 129C
	8226	1369	PM-AN-1370	J-1502000-17 1-pc Thermostat, DigitalRM 116
	8226	1370	PM-AN-1370	J-1502000-17 1-pc Thermostat, DigitalRM 103
	8226	1371	PM-AN-1370	J-1502000-17 1-pc ThermostatRM 103
	8240	1462	PM-MO-1462	J-1502000-49 1-pc Automatic Gate SglGate,Auto,Cantilever West Property Entrance
	8245	2268	PM-SA-2268DH	J-1502000-14 1-pc Dehumidifier-

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Troy CRAIG Date: 4/2/19

Signed: T. Craig

To be signed by Facility Manager:

Print Name/Rank: S.T. Myers, Glenn SFC Date: 2 Apr 19

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Signed: 

E-Mail: _____