

CERTIFICATION OF WORK

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

FACID/Building: VA039-01 Date of Visit: 2-6-19

Contractor Personnel on Site:

1. ISG 2. _____

Work Performed:

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

W/O #	Asset #	Asset Description
7368	6789	J-1502000-23 1-pc Freezer, 2 Section, Reach In, Electric
7368	6815	J-1502000-23 1-pc Ice Maker Machine Filter Feb
7368	6859	J-1502000-23 1-pc Refrigerator, 2 Section
7368	7077	J-1502000-27 Water Heater
7300	7415	J-1502000-45 10-pc Flood Light, Pole Mounted Fluorescent
7300	7445	J-1502000-45 3-pc Double Light, Pole Mounted Aluminum Fluorescent
7441	7078	J-1502000-27 Water Heater

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Andy Bird Date: 2-6-19Signed: Andy Bird

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: _____ Date: 2/6/19Signed: SM

E-Mail: _____