

*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: VA051-01_____ Date of Visit: 8-13-19

Contractor Personnel on Site:

1. JSG 2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
	10179	3015	FQ-3015	J-1502000-04 1-pc Ac Unit, Hallway Quarterly Filter PM
	10179 10179	3016 3191	FQ-3015	J-1502000-04 1-pc AC Unit, Heat Pump, Fan Coil Unit cap 479 PSIG Quarterly Filter PM
	10179 10179	3017 3192	FQ-3015	J-1502000-04 1-pc AC Unit, Heat Pump, Fan Coil Unit cap 478 PSIG Quarterly Filter PM
	10179	3161	FQ-3015	J-1502000-04 1-pc Air Handler, With Chilled Water Quarterly Filter PM
	10179	3185	FQ-3015	J-1502000-04 1-pc Air Unit, Outdoor Quarterly Filter PM
	10179	3186	FQ-3015	J-1502000-04 1-pc Air Unit, Outdoor Quarterly Filter PM
	10179	3187	FQ-3015	J-1502000-04 1-pc Air Unit, Outdoor Quarterly Filter PM
	10179	3188	FQ-3015	J-1502000-04 1-pc Air Unit, Outdoor Quarterly Filter PM
	10179	3189	FQ-3015	J-1502000-04 1-pc Air Unit, Outdoor Quarterly Filter PM
	10179	3190	FQ-3015	J-1502000-04 1-pc Air Unit, Outdoor Quarterly Filter PM

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Andy Bial Date: 8-13-19

Signed: Andy Bial

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To be signed by Facility Manager:

Print Name/Rank:

Joe Frate

Date:

8-13-14

Signed:

E-Mail: