

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

FACID/Building: WV005-01 _____ Date of Visit: 12-17-18

Contractor Personnel on Site:

1. 15G 2. _____

Work Performed:

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

Service Orders -

PM/SO	WO #	Asset #	PM #	Asset Description
	6570	7486	PM-QT-7486	J-1502000-48 1-pc Grease Trap
	6487	7444	PM-MO-7444	J-1502000-45 3-pc Double Light, Pole Mounted Aluminum
	6487	7474	PM-MO-7444	J-1502000-45 9-pc Flood Light, Pole Mounted Aluminum
	6624	8082	PM-QT-8082	J-1502000-57 4-pc Overhead Vehicle Exhaust System
	6695	4174	PM-SA-4174	J-1502000-08 1-pc Unit Heater, Electric, Suspended
	6695	4497	PM-SA-4174	J-1502000-08 2-pc Unit Heater, Electric, Wall Mounted
	6695	4573	PM-SA-4174	J-1502000-08 4-pc Unit Heater, Electric, Suspended

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Andy Bird Date: 11-17-18

Signed: 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: _____

Signed: Theresa Collier

E-Mail: _____