

CERTIFICATION OF WORK

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

FACID/Building: WV009-01 _____ Date of Visit: 3 December 2018

Contractor Personnel on Site:

1. Patrick Davis 2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
	6506	7557	PM-MO-7557	J-1502000-49 1-pc Single Gate Automatic Cantilever NW Site Gate
	6629	8089	PM-QT-8089	J-1502000-57 7-pc Overhead Vehicle Exhaust System
	6639	3963	PM-SA-3963	J-1502000-08 1-pc Fan Coil
	6639	3975	PM-SA-3963	J-1502000-08 1-pc Fan Coil
	6639	4072	PM-SA-3963	J-1502000-08 1-pc Infrared Unit Heater
	6639	4120	PM-SA-3963	J-1502000-08 1-pc Unit Heater, Electric
	6639	4124	PM-SA-3963	J-1502000-08 1-pc Unit Heater, Electric
	6639	4162	PM-SA-3963	J-1502000-08 1-pc Unit Heater, Electric, Suspended
	6639	4163	PM-SA-3963	J-1502000-08 1-pc Unit Heater, Electric, Suspended
	6639	4474	PM-SA-3963	J-1502000-08 2-pc Unit Heater
	6639	4478	PM-SA-3963	J-1502000-08 2-pc Unit Heater
	6639	4609	PM-SA-3963	J-1502000-08 6-pc Unit Heater, Electric
	6639	4623	PM-SA-3963	J-1502000-08 8-pc Infrared Unit Heater

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To be signed by the Contractor:

Print Name: Patrick Davis Date: 3 December 2018

Signed: Patrick Davis

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: Karen Y Hill GS07 Date: 3 DEC 2018

Signed: Karen Y Hill

E-Mail: Karen.y.hill2.civ@mail.mil