

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

FACID/Building: WV014-01 _____ Date of Visit: 14 December 2018

Contractor Personnel on Site:

1. Patrick L Davis 2. _____

Work Performed:

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

Service Orders -

PM/SO	WO #	Asset #	PM #	Asset Description
	6502	7470	PM-MO-7470	J-1502000-45 7-pc Flood Light, Pole Mounted
	6573	7490	PM-QT-7490	J-1502000-48 1-pc Grease Trap cap 50
	6573	8056	PM-QT-7490	J-1502000-57 1-pc Overhead Vehicle Exhaust System
	6631	3952	PM-SA-3952	J-1502000-08 12-pc Unit Heater, Electric, Suspended

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick L Davis Date: 14 December 2018
Signed: Patrick L 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: Perez Acosta MSG Date: 2018/12/14
Signed: Gloria Perez Acosta

E-Mail: gloria.perezacosta.mil@mail.mil