

CERTIFICATION OF WORK

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

FACID/Building: WV031-01_____ Date of Visit: _____

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
	6687	4159	PM-SA-4159	J-1502000-08 1-pc Unit Heater, Electric, Suspended
	6687	4569	PM-SA-4159	J-1502000-08 3-pc Unit Heater, Hot Water
	6496	7460	PM-MO-7460	J-1502000-45 4-pc Motor Vehicle Area Light Wood LED Photocell Contacts
	6612	8067	PM-QT-8067	J-1502000-57 2-pc Overhead Vehicle Exhaust System
	6677	4138	PM-SA-4138	J-1502000-08 1-pc Unit Heater, Electric Space Heater 1
	6677	4254	PM-SA-4138	J-1502000-08 1-pc Unit Heater, Gas, Suspended
	6677	4272	PM-SA-4138	J-1502000-08 1-pc Unit Heater, Gas, Suspended
	6677	4316	PM-SA-4138	J-1502000-08 1-pc Unit Heater, Gas, Suspended

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To be signed by the Contractor:

Print Name: _____ Date: _____

Signed: _____

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: _____

E-Mail: _____