

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

FACID/Building: WV046-01 \_\_\_\_\_ Date of Visit: 12 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
	6505	7555	PM-MO-7555	J-1502000-49 Manual Gate
	6664	4086	PM-SA-4086	J-1502000-08 1-pc Unit Heater
	6664	4167	PM-SA-4086	J-1502000-08 1-pc Unit Heater, Electric, Suspended
	6664	4358	PM-SA-4086	J-1502000-08 1-pc Unit Heater, Hot Water
	6664	4423	PM-SA-4086	J-1502000-08 1-pc Unit Heater, Hot Water, Ceiling Suspended
	6664	4525	PM-SA-4086	J-1502000-08 2-pc Unit Heater, Hot Water
	6664	4590	PM-SA-4086	J-1502000-08 4-pc Unit Heater, Hot Water
	6493	7455	PM-MO-7455	J-1502000-45 4-pc 2 LED Fixture Steel LED Photocell Contacts
	6584	8032	PM-QT-8032	J-1502000-57 10-pc Overhead Vehicle Exhaust System
	6672	4123	PM-SA-4123	J-1502000-08 1-pc Unit Heater, Electric

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To be signed by the Contractor:

Print Name: Patrick Davis Date: 12 December 2018  
Signed: Patrick Davis

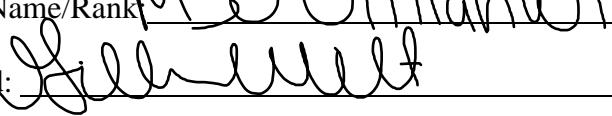
To be signed by Facility Manager:

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

MSG Gillian Witt Date 20212

Signed:



E-Mail:

