

CERTIFICATION OF WORK

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

FACID/Building: WV006-01 _____ Date of Visit: 2-19-19

Contractor Personnel on Site:

1. ISG 2. _____

Work Performed:

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

| W/O # | Asset # | Asset Description |
|-------|---------|---|
| 7385 | 6833 | J-1502000-23 1-pc Ice Maker, Hotel/Motel Machine w/ Storage Bin Filter Feb |
| 7385 | 6888 | J-1502000-23 1-pc Refrigerator, 3 Section |
| 7385 | 6902 | J-1502000-23 1-pc Refrigerator, Reach In |
| 7385 | 7012 | J-1502000-27 1-pc Water Heater cap 40 Gal |
| 7385 | 7061 | J-1502000-27 2-pc Water Heater cap 301 Gal/hr |
| 7401 | 6905 | J-1502000-23 1-pc Refrigerator-Freezer |
| 7401 | 6975 | J-1502000-27 1-pc Water Heater cap 100 gal |

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To be signed by the Contractor:

Print Name: Andy Bird Date: 2-19-19

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: RICHARD MOTZER Date: 19 Feb 2019

Signed: R. M. Motzer

E-Mail: _____