

*By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified time line:

CERTIFICATION OF WORK

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

Building: WV006-01 _____ Date of Visit: 8-19-19

Contractor Personnel on Site:

1. TSG 2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
	10175	3002	FQ-3002	J-1502000-04 1-pc AC Unit AC-1 Quarterly Filter PM
	10175	3003	FQ-3002	J-1502000-04 1-pc AC Unit AC-2 Quarterly Filter PM
	10175	3004	FQ-3002	J-1502000-04 1-pc AC Unit R 115 Quarterly Filter PM
	10175	3005	FQ-3002	J-1502000-04 1-pc AC Unit, ArmsVault AC-3 Quarterly Filter PM
	10175	3202	FQ-3002	J-1502000-04 1-pc Air Unit, Rooftop AC-1 Quarterly Filter PM
	10175	3203	FQ-3002	J-1502000-04 1-pc Air Unit, Rooftop AC-2 Quarterly Filter PM
	10175	3204	FQ-3002	J-1502000-04 1-pc Air Unit, Rooftop HV2 Quarterly Filter PM
	10432	6833	PM-QT-6833	J-1502000-23 1-pc Ice Maker, Hotel/Motel Machine w/ Storage Bin Annual Filter PM
	10432	6888	PM-QT-6833	J-1502000-23 1-pc Refrigerator, 3 Section
	10432	6902	PM-QT-6833	J-1502000-23 1-pc Refrigerator, Reach In
	10432	7012	PM-QT-6833	J-1502000-27 1-pc Water Heater cap 40 Gal
	10432	7061	PM-QT-6833	J-1502000-27 2-pc Water Heater cap 301 Gal/hr

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To be signed by the Contractor:

Print Name: Dwight Reid Date: 8-19-19

Signed: Dwight Reid

To be signed by Facility Manager:

Print Name/Rank: Mark Boggess Date: 8-19-2019

Signed: Mark Boggess

E-Mail: _____