

*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: WV020-01_02 _____ Date of Visit: 9-19-19

Contractor Personnel on Site:

1. ISG 2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
	10778	4866		J-1502000-12 1-pc Glycol Feed System Pump
	10778	4867		J-1502000-12 1-pc Glycol LevelController
	10778	4988		J-1502000-12 1-pc Polyethylene Tank cap 50 Gal
	10958	5255		J-1502000-16 1-pc Boiler Panel
	10958	5270		J-1502000-16 1-pc HVAC Control Panel
	10958	5276		J-1502000-16 1-pc HVAC Control Panel
	10958	7375		J-1502000-44 2-pc Double Light, Pole Mounted Aluminum Fluorescent Time Clock
	10734	7436		J-1502000-45 2-pc Double Light, Pole Mounted Aluminum Metal Halide Time Clock
	10766	4838		J-1502000-12 1-pc Chem Bypass Feeder cap 5 Gal
	10766	5001		J-1502000-12 2-pc Hot Water Pump
	10894	4650		J-1502000-09 1-pc Packaged Terminal AC PTAC Quarterly Filter PM
	10894	5277		J-1502000-16 1-pc HVAC Control Panel

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Lahonna Fowler Date: 20190919

Signed: Lahonna Fowler

To be signed by Facility Manager:

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Print Name/Rank: _____ Date: _____

Signed: _____

E-Mail: _____