

CERTIFICATION OF WORK

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

FACID/Building: WV046

Date of Visit: 2/28/19

Contractor Personnel on Site:

1. Ray Chain
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**Work Performed:**

**Preventive Maintenance** - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Inspection, Testing, and Certification**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Other Recurring Services**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Service Calls** – Service Call Number and Description

1. 7586 Diagnose Part B washer
2. 7587 Diagnose Lube System issues
3. 7589 Diagnose AIR valve on Oil Recovery System

Description of Problem

**Over and Above Repair Work** – Order Number and Description of Work Completed

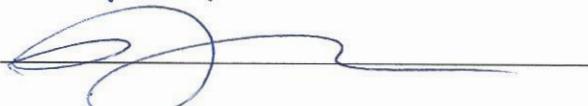
Lube - BAY 2/3 Lensing hose BAY 6/7 Screen Broken - yellow  
7587 BAY 6/7 worn smy Locked Bkt BAY 6/7 Blue worn in one  
BAY 3/4 15/6 Blue Broken Screen (And) Blue Hose lens  
BAY 3/4 15/6 - Yellow Doesnt work  
7587 Lube Pump Area - NEED 4 New o-rings, all 4 replacement lens  
Oil Recovery - AIR valve Does not shut when tank is full - Spill Risk!  
Pump washer - Rotation motor seized, Element Controls Burned up  
7586

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Ricky Chan Date: 2/28/19

Signed: 

To be signed by Facility Manager:

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 timeline:

Print Name/Rank: Dwayne Felton WG08 Date: Feb 28, 2019

Signed: 

E-Mail: dwayne.a.felton4.civ@mail.mil

