

ATTACHMENT J-0200000-05
FORMS

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

FACID: VA099

Building: Bedford Gate

Contractor Personnel on Site:

1. Keith Pearson
2. Chris DeVine

Date of Visit: 5-20-21

CSS: 30224

CMMS: 1015 WO 1414.6 Est. 1780

Service Order: ☒

Corrective Maintenance: ☐

Service Order Work Performed:

Unit: Gate operator

Manufacturer: Lift master

Model: _____

Serial: _____

Description: Repair the safety eye, or the safety edge on the motorized gate to the Ashley FFR motor pool

Issues with Gate

Repairs: Found 2 Bad Limit switches, one bad on Bowell
lday. Unit is beyond repair. Recommend new

pad is 24' x 24'
ARM 13 24'

To be signed by the Contractor:

Print Name: Keith Pearson

Signed: [Signature]

Date: 5-20-21

To be signed by Facility Manager:

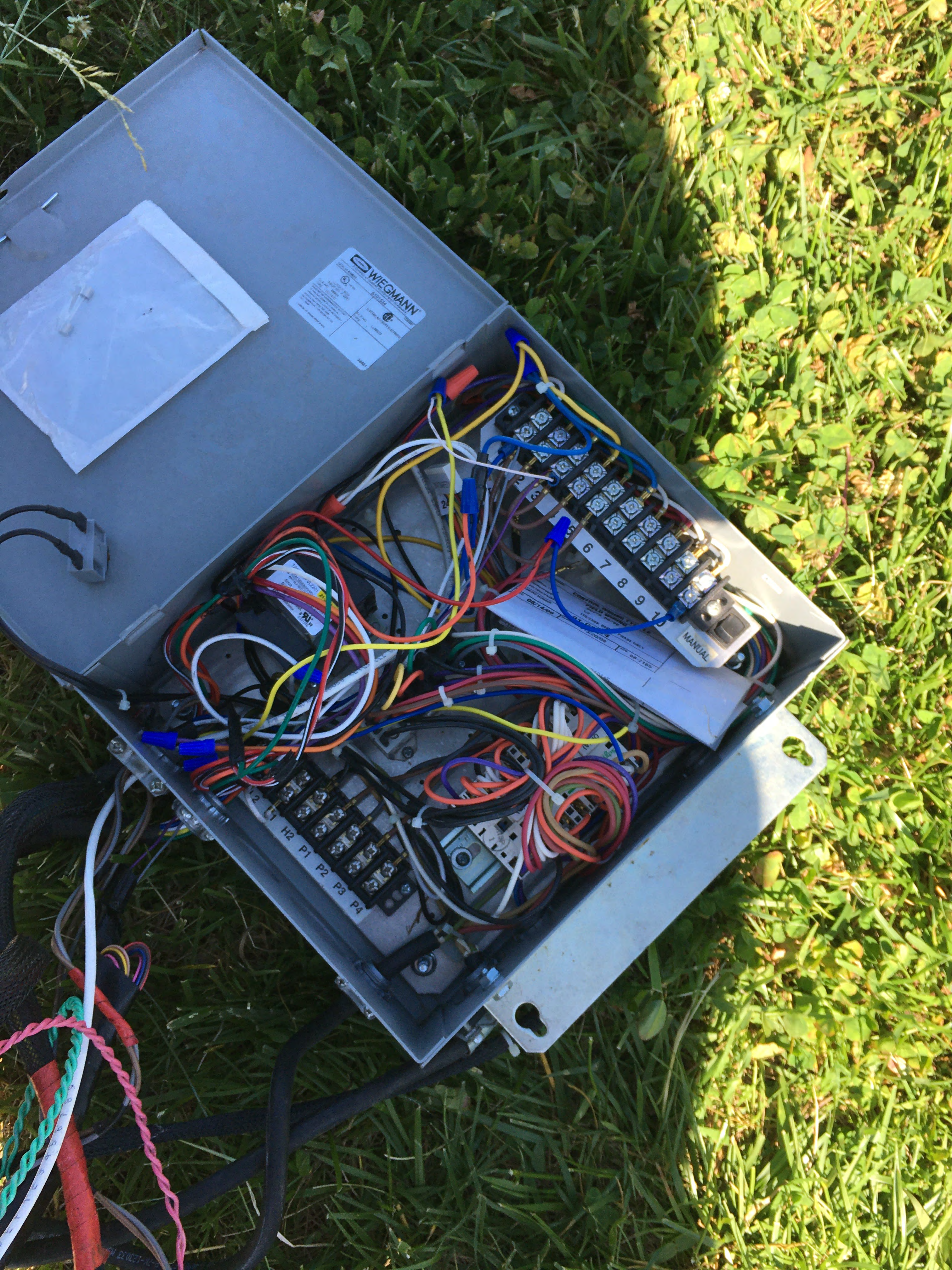
I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: Henderson, Tiro II

Signed: [Signature]

E-Mail: Tyrell.L.Henderson.mil@mail.mil

Date: 2021/05/20



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CATALOG NUMBER: S101534	FILE NO.: LL66078
CUTOUT BOX SUE NO. K-2231	TYPE: 1
FILE NO.: E6924	TYPE: 1
TYPE: ENCLOSURE	

MAINTAIN THE ENVIRONMENTAL INTEGRITY
OF THIS ENCLOSURE BY CLOSING ALL
OPENINGS WITH A LISTED OR RECOGNIZED
DEVICES THAT HAVE THE SAME
ENVIRONMENTAL TYPE RATING AS THE
ENCLOSURE
COUNTRY OF ORIGIN: MADE IN USA

34461





