

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

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

FACID/Building: NY060 schwartz

Date of Visit: 10-31-22

Contractor Personnel on Site:

1. MICO 
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed:

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

1. W-A
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. W-A
2. _____
3. _____
4. _____

Other Recurring Services

1. W-A
2. _____
3. _____
4. _____

Service Calls - Service Call Number and Description

1. CSS# 90374 BPI 100459 GOT MATERIAL LIST
2. Installments for installation of Smogene, Shut down
3. Switch for Ballofs.

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

CSS# 90324 BPI# 100459

Got List of material for installing NEW Ball or
start/stop switch.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Mike Dull Date: 10-31-22
Signed: Mike Dull

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: Chris Pothier Date: 10-31-22
Signed: Chris Pothier
E-Mail: christopher.n.pothier ctr@army.mil

CERTIFICATION OF WORK

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

FACID/Building: NY060 ~~Scheduled~~ Date of Visit: 12-9-22

Contractor Personnel on Site:
100664

1. Mike
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed:

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

1. N/A
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. N/A
2. _____
3. _____
4. _____

Other Recurring Services

1. N/A
2. _____
3. _____
4. _____

Service Calls - Service Call Number and Description

1. 055# 903>4 Run 3/4" EMT across Boiler RM
2. From Boilers TO BACK DOOR. Cycled POWER from
3. NEW EMERGENCY SHUT OFF SWITCH - QPS X/CREW

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

RAE 34" EMT ACROSS Boiler Rim from
Boilers TO BACK DOOR. Cycled Power from EMERGENCY
SLOT off SWITCH QPSX Normal

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Milo Dull Date: 12-9-22

Signed: Milo Dull

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: Chris Pothier AFOS Date: 12-9-22

Signed: Chris Pothier

E-Mail: _____