

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: NY060 Schenectady Date of Visit: 1-16-23

Contractor Personnel on Site:

1. Mil613
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed:

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

1. D-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. CSS 91354 881 100944
2. REMOVED BAD CIRC PUPS AT EA Boiler Replaced with
3. NEW GRUNFOS CIRC PUPS. NO LEAKS. CPS NORMAL

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

CS5 #91354 BPI 100944
REMOVED BAD CIRC PUPS AT EA. Baited.
REPLACED WITH NEW GROUP OF 5 CIRC PUPS.
NO LEAKS. CPS NORMAL

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Mike Dunn Date: _____

Signed: John Doe

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: Chas Pothier AFOS Date:

Signed: Chris Peltz

E-Mail: info@mathworks.com