

ATTACHMENT J-0200000-05  
FORMS

CERTIFICATION OF WORK

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

FACID/Building: PH001 Albany Date of Visit: FEB-3-23

Contractor Personnel on Site:

1. Mike Dull
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 91941
2. Few bad induced fax motor at Barker worth
3. \_\_\_\_\_

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

CSS 91941

found bad indoor fan motor at Boiler no# 1

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Mike J Dugell Date: 2-7-23

Signed: Mike Dugell

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: 2-7-23

Signed: Chris Pothier

E-Mail: \_\_\_\_\_