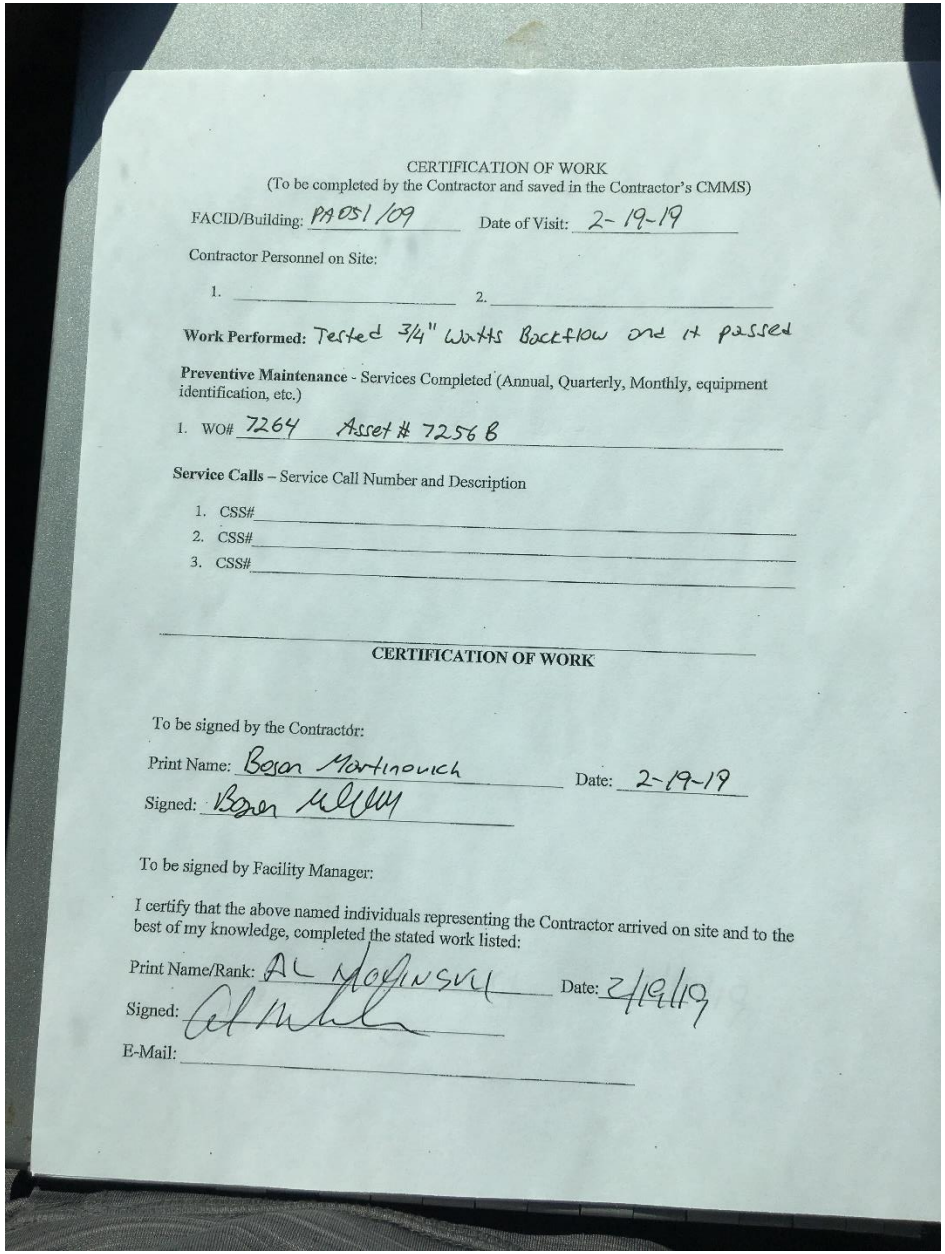


CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: PA051/09 Date of Visit: 2-19-19

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed: Tested 3/4" Watts Backflow and it passed

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

1. WO# 7264 Asset # 7256 B

Service Calls – Service Call Number and Description

1. CSS#_____
2. CSS#_____
3. CSS#_____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Beson Martinovich Date: 2-19-19

Signed: Beson Martinovich

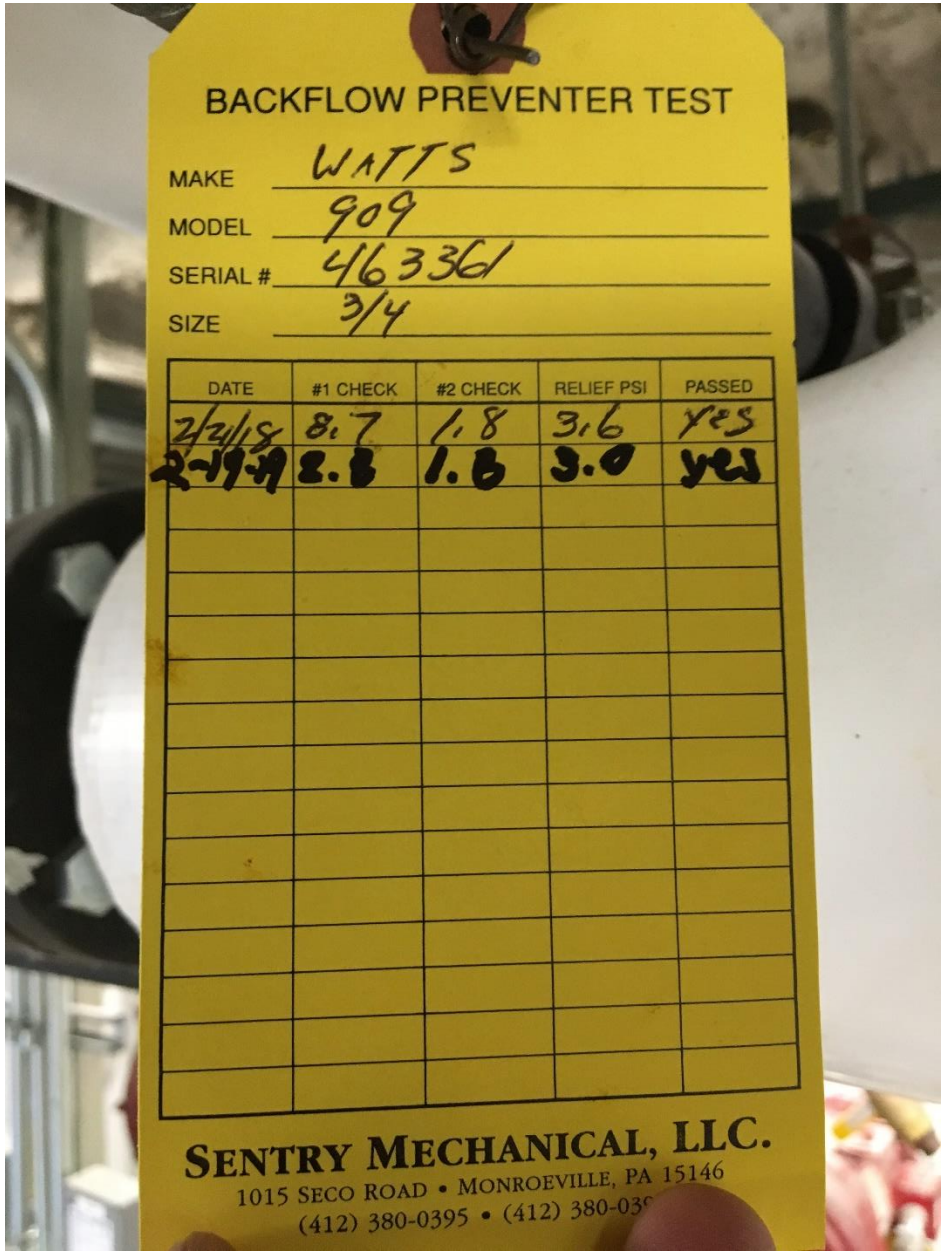
To be signed by Facility Manager:

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: AL MOLINSKI Date: 2/19/19

Signed: Al Molinski

E-Mail: _____


BACKFLOW PREVENTER TEST
MAKE WATTS
MODEL 909
SERIAL # 46336
SIZE 3/4
DATE #1 CHECK #2 CHECK RELIEF PSI PASSED
2/2/18 8.7 1.8 3.6 YES
2-19-19 8.8 1.6 3.0 yes
SENTRY MECHANICAL, LLC.
1015 SECO ROAD • MONROEVILLE, PA 15146
(412) 380-0395 • (412) 380-03

Pa 051-09 Backflow
Asset# 7256 B


909
RPZ
140°F 175 PSI
SER.
WATTS REGULATOR CO