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

FACID/Building: PA096-01 Date of Visit: 2-28-19

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed: Tested 3/4" Wilkins Backflow one it passed

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

1. WO# 7257 Asset # 7225

Service Calls – Service Call Number and Description

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

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Bojan Martinovich Date: 2-28-19

Signed: _____

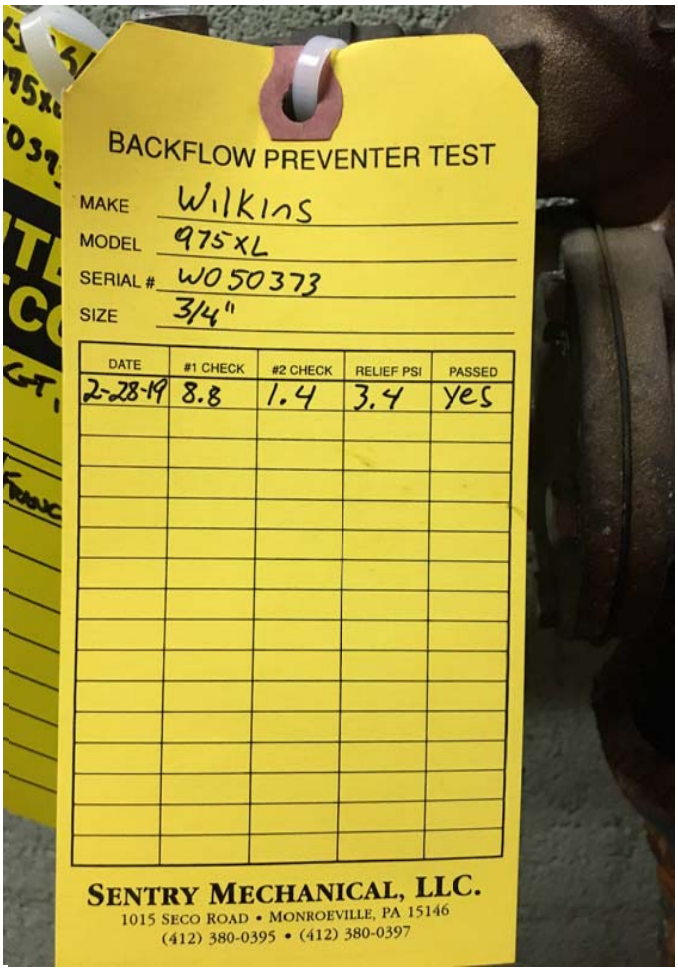
To be signed by Facility Manager:

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: Hannah Flonan Date: 2/28/19

Signed: Hannah Flonan

E-Mail: hannah.l.flonan.civ@mail.mil



BACKFLOW PREVENTER TEST

MAKE Wilkins

MODEL 975XL

SERIAL # W050373

SIZE 3/4"

DATE	#1 CHECK	#2 CHECK	RELIEF PSI	PASSED
2-28-19	8.8	1.4	3.4	yes

SENTRY MECHANICAL, LLC.
1015 SECO ROAD • MONROEVILLE, PA 15146
(412) 380-0395 • (412) 380-0397