CERTIFICATION OF WORK

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

FACID/Building: PA166-01 Date of Visit: 2-26-19

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed: Tested 1" Watts Backflow and it passed

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

1. WO# [illegible] WO#7222 Asset # 7150

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: 2-26-19

Signed: Bojan 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: TIMOTHY S PETERS Date: 26 FEB 19

Signed: _____

E-Mail: _____

BACKFLOW PREVENTER TEST

MAKE Watts

MODEL 009M2QT

SERIAL # 116112

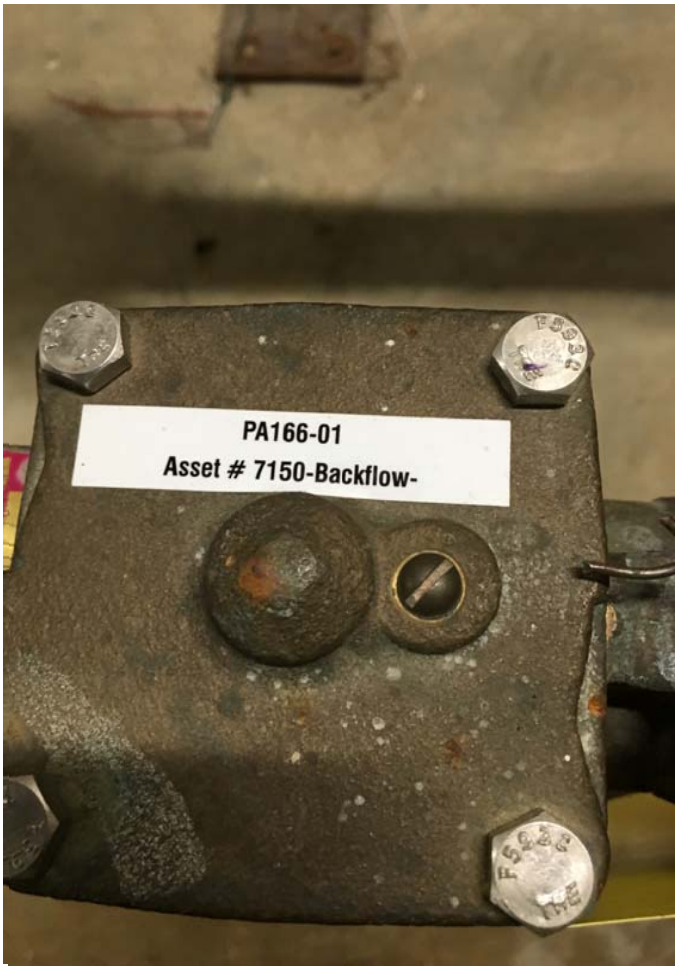
SIZE 1"

DATE	#1 CHECK	#2 CHECK	RELIEF PSI	PASSED
2-26-19	8.4	1.4	3.6	yes

SENTRY MECHANICAL, LLC.

1015 SECO ROAD • MONROEVILLE, PA 15146

(412) 380-0395 • (412) 380-0397




BACKFLOW PREVENTER TEST
BACKFLOW PREVENTER TEST