



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

FACID/Building: PA166-03 Date of Visit: 2-26-19

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed: Tested 4" Ames Backflow and it passed

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

1. WO# 7224 Asset # 7154

Service Calls - Service Call Number and Description

1. CSS# _____

2. CSS# _____

3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Boyer Mgt/Ino/en Date: 2-26-19

Signed: Boyer Mgt/Ino/en

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: Timothy S Peters

E-Mail: _____



[illegible]

AMES

300055

8/18209/3

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[illegible]

SENTRY MECHANICAL, LLC.

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