

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

FACID/Building: PA166-6B Date of Visit: 2-26-19

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed: Need to replace the Backflow it was leaking all over the place

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

1. WO# 7225 Asset # 7189

Service Calls - Service Call Number and Description

1. CSS# _____

2. CSS# _____

3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ben Martovich Date: 2-26-19

Signed: [Signature]

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: Tommy S Peters Date: 26 FEB 19

Signed: [Signature]

E-Mail: _____

CMI BACKFLOW - INFORMATION FOR REPAIR

Repair to be done Need to replace the Backflow it was leaking all over the place

Asset # 7189

How many hours needed to perform repairs 4

Vendor quoting parts American Backflow

Material price \$232.75

Request quote to be emailed Tommy



