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

FACID/Building: PA1014/PA193 Date of Visit: 2-19-19

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed: Tested 3" Wilkins backflow and it passed

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

1. WO# 7255 Asset # 7209 M# 375 S# L17859

Service Calls – Service Call Number and Description

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

CERTIFICATION OF WORK

To be signed by the Contractor:

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

Signed: Bosan Martinovich

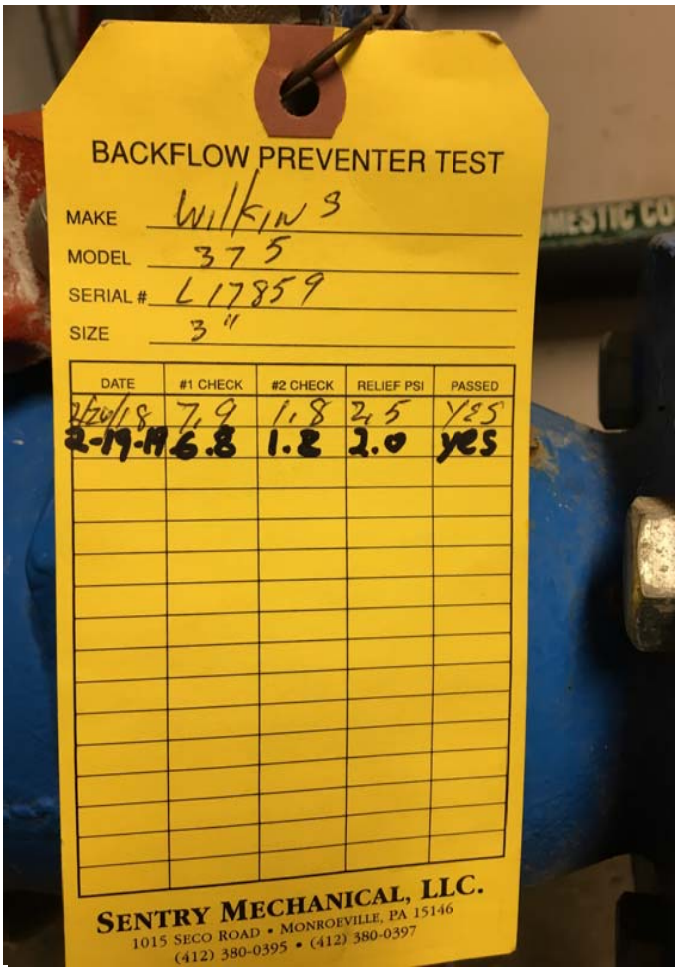
To be signed by Facility Manager:

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: K. Myslinski Date: 2-19-19

Signed: K. Myslinski

E-Mail: _____


BACKFLOW PREVENTER TEST
MAKE Wilkins
MODEL 375
SERIAL # L17859
SIZE 3"
DATE | #1 CHECK | #2 CHECK | RELIEF PSI | PASSED
2/20/18 | 7.9 | 1.8 | 2.5 | YES
2-19-19 | 6.8 | 1.2 | 2.0 | yes
SENTRY MECHANICAL, LLC.
1015 SECO ROAD • MONROEVILLE, PA 15146
(412) 380-0395 • (412) 380-0397