

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

FACID/Building: *617th BSS AD 013* Date of Visit: *2/3/2020*

Contractor Personnel on Site:

1. *Patrick Donovan*

2.

Work Performed:

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

1. *11593, 11655, 11681, 11594, Filters on AHU's, Water heaters*
Backflow Certification

Service Calls - Service Call Number and Description

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

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: *Patrick Donovan* Date: *2/3/2020*

Signed: *[Signature]*

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: *Glenn R. Umberger Jr. GS-13* Date: *6 Feb 2020*

Signed: *[Signature]*

E-Mail: *glenn.r.umberger.civ@mail.mil*

SITE AND BLDG #: Southisbury MD013

LOCATION/RM#: Bldg#2
Area/Rm: W0# 11594

MECHANIC
SIGNATURE:

100

DATE: 2/3/2020

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For any deficiencies found exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed description of the deficiency.

To be performed by: General Maintenance Technician
Additional Notes: