

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

FACID/Building: 1416R Marlboro  
MD016

Date of Visit: 3/29/18

Contractor Personnel on Site:

4. Kevin Reece

4. Atik Buorau

5.

**Work Performed:**

## Inspection, Testing, and Certification

5. Rebuild Backflow (Wilkins)

6. \_\_\_\_\_

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Kevin R. Reece

Date: 3/29/18

Signed: Kafeela

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: Deborah A. Hashem, SSA

Date: 29 Mar 18

Signed: Debra Yorkin

E-Mail: \_\_\_\_\_