

CERTIFICATION OF WORK

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

FACID/Building: MDCIDate of Visit: 6/17/20

Contractor Personnel on Site:

1. Brion Davis
2. Casey Davis
3. _____

4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. _____
2. #12183 Chiller Repair
3. WO 12445 Generator heat repair
WO# 12445 CSS# Generator

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Casey Davis Date: 6/17/20Signed: Casey Davis

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: SFC WILLOUGHBY Date: 17 JUN 2020Signed: Ryan M. WilloughbyE-Mail: ryan.m.willoughby3.mil@mail.mil

Millennium™ Screw Chiller

STATUS

LCHLT = 48.4 °F
RCHLT = 48.8 °F

Display

CHILLED
LIQUID TEMPS

SYSTEM 1
DATA

SYSTEM 2
DATA

SYSTEM 3
DATA

SYSTEM 4
DATA

AMBIENT
TEMP

MOTOR
CURRENT

OPERATING HRS/
START COUNTER

OPTIONS

FUNCTION

Entry

1	2	3
4	5	6
7	8	9
*	0	+/-

ENTER

CANCEL

↑

↓

Print

OPER
DATA

HISTORY

Program

Setpoints

LOCAL COOLING
SETPOINTS

REMOTE COOLING
SETPOINTS

Clock

SET
TIME/DATE

SET SCHEDULE
/HOLIDAY

MANUAL
OVERRIDE

UNIT
ON
OFF

