

CERTIFICATION OF WORK

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

FACID: _____

Date of Visit: 7-16-20

Building: Canton NY

CSS: 20293 EST-1526

Contractor Personnel on Site:

CMMS: WO-7689

1. Keith Pearson

Service Order: ☒

2. Scott Segit

Corrective Maintenance: ☐

Service Order Work Performed:

Unit: Gate operator

Manufacturer: Viking

Model: L-3

Serial: 0516-L3UL-1146

Description: Req Diagnose Gate and Keypad not
Working

Found missing fuse for motor. Spoke w TECH
Support motor most likely BAD

Repairs: Need to order parts & return to install
Further Trouble shooting may be necessary

To be signed by the Contractor:

Print Name: Keith Pearson Date: 7-16-20

Signed: [Signature]

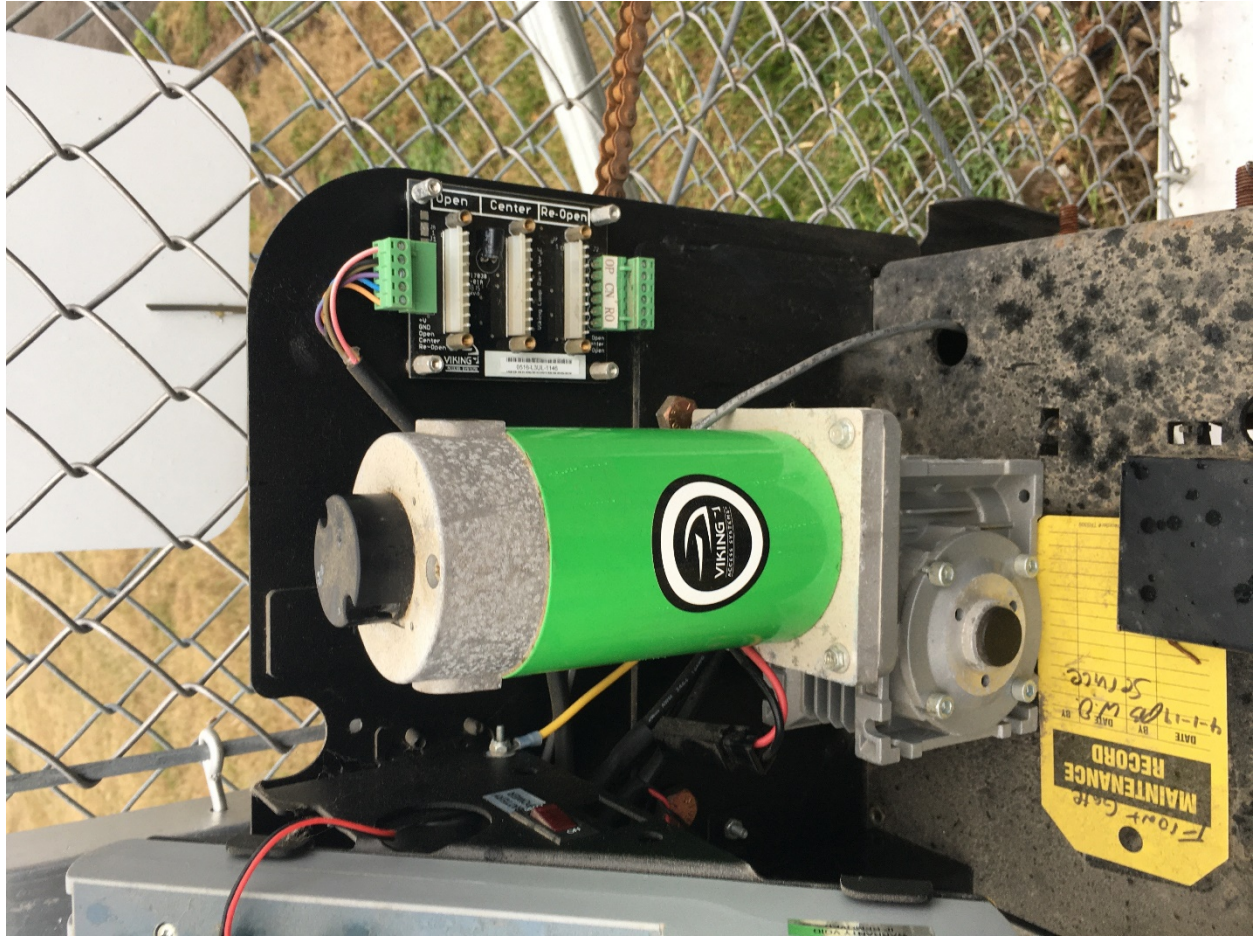
To be signed by Facility Manager:

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: Michael McCarthy 65-09 Date: 16 July 2020

Signed: [Signature]

E-Mail: Michael.C.McCarthy@U.S.A. Mail.mil



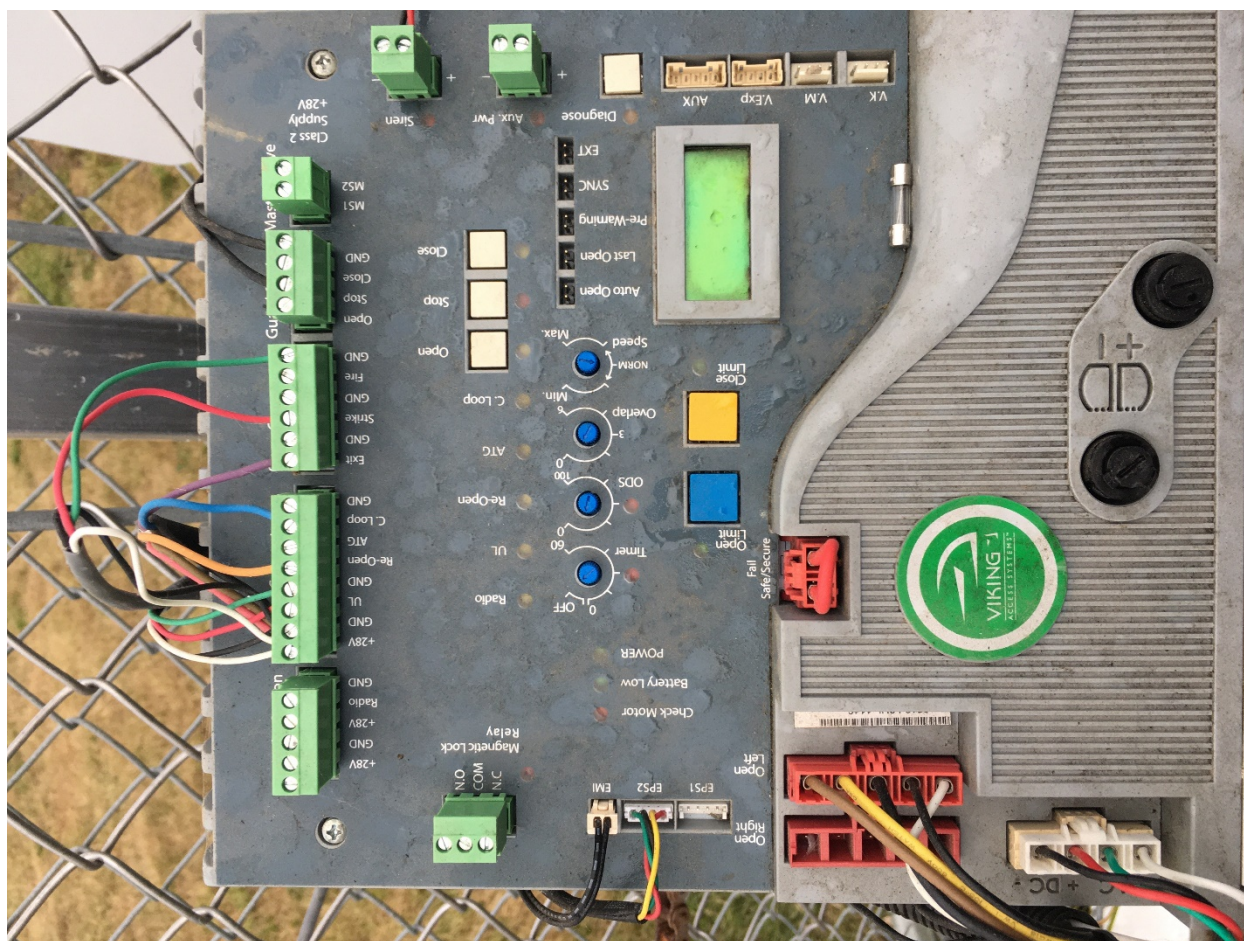
















Vehicular Gate Operator Model L-3

Class I
Class II
Class III
Class IV



Date:

5/18/2013

0516-L3UL-1146

SN#

Volts (VAC)	Freq (Hz)	Amps	Phase	Max Gate Weight (lbs)	Max Gate Length (ft)
120	50-60	6.00 *	1	1,600 1,200 (1)	60 40 (1)
240	50-60	1.5	1	1,600 1,200 (1)	60 40 (1)

* Includes 3 amp load on receptacle

(1) ETL Rating

Max Duty Cycle	Max Speed
100 %	12 in/sec



LISTED
18TC



Conforms to
UL Std
325

Certified to
CSA Std
C22.22 No
247

Intertek
4007950

