

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:

CERTIFICATION OF WORK

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

FACID/Building:

Date of Visit: 3/2/23

Contractor Personnel on Site:

1. Deen Rowe 2. _____

Work Performed:

Preventive Maintenance - (Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders -

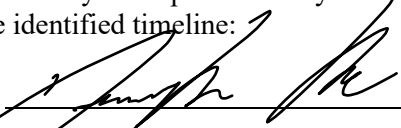
PM/SO	WO #	Asset #	PM #	Asset Description
	21085	190917-164	PFQ190917164	1-pc AC Units
	21085	190917-165	PFQ190917164	1-pc AC Units
	21085	190917-166	PFQ190917164	1-pc AC Units
	21132	9337	PM-FQT-9337	J-04 1-pc Air Handler
	21200	IL-16	PM-MO-IL-16	Interior Light in Building NY023-123
	21267	9385	PM-QT-9385	J-57 1-pc Overhead Exhaust System
	21268	9386	PM-QT-9386	J-57 1-pc Overhead Exhaust System
	21269	9387	PM-QT-9387	J-57 1-pc Overhead Exhaust System
	21270	9388	PM-QT-9388	J-57 2-pc Overhead Exhaust System
	21376	9337	PM-SA-9337	J-04 1-pc Air Handler
	21430	190917-164	PMS190917164	1-pc AC Units
	21430	190917-165	PMS190917164	1-pc AC Units
	21430	190917-166	PMS190917164	1-pc AC Units
	21430	190917-167	PMS190917164	1-pc mini split
	21430	190917-168	PMS190917164	2-pc mini split

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Deen Rowe Deen Rowe Date: 3/2/23

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:

Signed:  _____

To be signed by Facility Manager:

Print Name/Rank: P COM TO Date: 3/21/23

Signed:  _____

E-Mail: PETER. J. COMATO .CIR @ARMY.MIL