

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: 9/9/21

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
	14406	190917-179	PFQ190917179	6-pc ptac 2nd floor
	14406	190917-180	PFQ190917179	7-pc ptac 1st floor
	14581	9425	PM-FQT-9425	J-04 1-pc Air Handler
	14582	9433	PM-FQT-9433	J-09 8-pc PTAC
	14774	9425	PM-SA-9425	J-04 1-pc Air Handler
	14775	9433	PM-SA-9433	J-09 8-pc PTAC
	14776	9436	PM-SA-9436	J-15 1-pc Mini Split
	14825	190917-174	PMS190917174	1-pc Condensation Unit
	14825	190917-175	PMS190917174	1-pc Condensation Unit
	14825	190917-176	PMS190917174	1-pc Condensation Unit
	14825	190917-177	PMS190917174	1-pc Condensation Unit
	14825	190917-178	PMS190917174	1-pc Condensation Unit
	14825	190917-179	PMS190917174	6-pc ptac 2nd floor
	14825	190917-180	PMS190917174	7-pc ptac 1st floor

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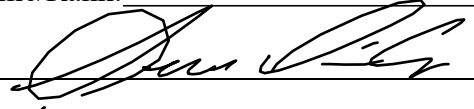
To be signed by the Contractor:

Print Name: Deen Rowe _____ Date: 9/9/21

Signed: 

To be signed by Facility Manager:

Print Name/Rank: Louis Corrao AFOS Date: 9-15-21

Signed: 

E-Mail: Louis.A.Corrao@AFOS@MIL.MIL