

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: 9/13/21

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
	14407	190917-203	PFQ190917203	1-pc AHU
	14407	190917-204	PFQ190917203	1-pc AHU
	14407	190917-205	PFQ190917203	1-pc AHU
	14407	190917-206	PFQ190917203	1-pc AHU
	14407	190917-207	PFQ190917203	1-pc AHU
	14407	190917-208	PFQ190917203	1-pc AHU
	14407	190917-209	PFQ190917203	1-pc AHU
	14407	190917-210	PFQ190917203	1-pc AHU
	14826	190917-203	PMS190917203	1-pc AHU
	14826	190917-204	PMS190917203	1-pc AHU
	14826	190917-205	PMS190917203	1-pc AHU
	14826	190917-206	PMS190917203	1-pc AHU
	14826	190917-207	PMS190917203	1-pc AHU
	14826	190917-208	PMS190917203	1-pc AHU
	14826	190917-209	PMS190917203	1-pc AHU

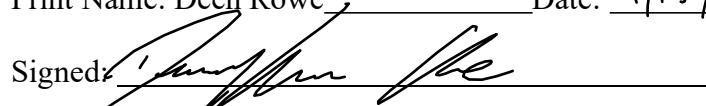
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	14826	190917-210	PMS190917203	1-pc AHU

CERTIFICATION OF WORK

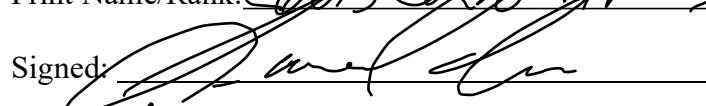
To be signed by the Contractor:

Print Name: Deen Rowe Date: 9/15/21

Signed: 

To be signed by Facility Manager:

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

Signed: 

E-Mail: Louis.A.Corra.CTR@usaf.mil