

ATTACHMENT J-0200000-05  
FORMS

Over and Above Repair Work – Order Number and Description of Work Completed

---

---

---

---

---

---


---

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: RAMON VILLANUEVA

Date: 12/9/19

Signed: 

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: \_\_\_\_\_

Date: 2/18/2020

Signed: 

E-Mail: \_\_\_\_\_

ATTACHMENT J-0200000-05  
FORMS

CERTIFICATION OF WORK

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

FACID/Building: NY050 Date of Visit: 12/14/15

Contractor Personnel on Site: ADPQA - W. V. A

1. PM - FOT - 9949 - 6179
2. PM - FOT - 9956 - 6180
3. PM - FOT - 9957 - 6181
- PM - FOT - 9952 - 6182

Work Performed:

PM - MO - 10019 - 6183

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

- PM - MO - 10020 - 6184
1. PM - MO - 10025 - 6185
2. PM - MO - 9972 - 6211
3. PM - QT - 10023 - 6212
4. PM - QT - 10034 - 6213

Inspection, Testing, and Certification

- PM - SA - 10016 - 6245
1. PM - SA - 10017 - 6246
2. PM - SA - 10018 - 6247
3. PM - SA - 10024 - 6248
4. PM - SA - 10026 - 6249
- PM - SA - 10027 - 6250

Other Recurring Services

- PM - SA - 10028 - 6251
1. PM - SA - 9957 - 6417
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Service Calls - Service Call Number and Description

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_