

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: 2/21/22

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
	15934	10168	PM-AN-10168	J-19 1-pc Boiler Rm 210
	15935	10169	PM-AN-10169	J-19 1-pc Boiler Rm 210
	15961	10170	PM-C3Y-10170	J-20 1-pc Air Compressor
	16024	10158	PM-QT-10158	J-12 1-pc Glycol Feed tank
	16025	10159	PM-QT-10159	J-12 1-pc Expansion tank
	16026	10160	PM-QT-10160	J-12 1-pc Expansion tank
	16027	10161	PM-QT-10161	J-12 1-pc Chemical feeder tank
	16028	10184	PM-QT-10184	J-27 1-pc Water Heater Inventory Rm 210
	16029	10185	PM-QT-10185	J-27 1-pc Water Heater Inventory Rm 210
	16030	10190	PM-QT-10190	J-43 1-pc Time Clock Rm 200
	16031	10191	PM-QT-10191	J-47 3-pc Emergency Exit Sign, Illuminated
	16190	10164	PM-SA-10164	J-16 1-pc Emergency stop
	16273	190917-313	PMS190917313	1-pc HW Pump
	16273	190917-314	PMS190917313	1-pc HW Pump

CERTIFICATION OF WORK

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:

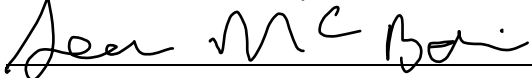
To be signed by the Contractor:

Print Name: Deen Rowe _____ Date: 2/21/22 _____

Signed:  _____

To be signed by Facility Manager:

Print Name/Rank: SEAN MCBAIN _____ Date: 02/28/22 _____

Signed:  _____

E-Mail: _____