

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: 6/28/21

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
	12882	190917-312	PFQ190917312	1-pc Raidant Floor HeatPump
	12896	10151	PM-AN-10151	J-07 5-pc Exhaust Fan
	12897	10152	PM-AN-10152	J-07 2-pc Bathroom Exhaust Fan
	12963	10144	PM-FQT-10144	J-04 1-pc Air Handler
	12964	10145	PM-FQT-10145	J-04 1-pc Air Handler
	12965	10150	PM-FQT-10150	J-06 1-pc Fuel Oil Booster Pump for Furnace
	13068	10202	PM-QT-10202	J-57 3-pc Overhead Exhaust System
	13111	10153	PM-SA-10153	J-08 6-pc Unit Heater, Hot Water
	13112	10192	PM-SA-10192	J-49 1-pc Single Gate, Manual, Sliding Southwest
	13113	10193	PM-SA-10193	J-49 1-pc Single Gate, Manual, Swinging Southwest
	13114	10194	PM-SA-10194	J-49 1-pc Single Gate, Manual, Swinging West Entrance
	13115	10195	PM-SA-10195	J-49 1-pc Single Gate, Manual, Sliding West Entrance
	13116	10196	PM-SA-10196	J-49 1-pc Single Gate, Manual, Swinging Northwest Entrance
	13117	10197	PM-SA-10197	J-49 1-pc Double Gate, Manual, Swinging NW Entrance

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To be signed by the Contractor:

Print Name: Deen Rowe Deen Rowe Date: 6/28/21

Signed: [Signature]

To be signed by Facility Manager:

Print Name/Rank: SFC ROSS 19122 Date: 28/june/2021

Signed: [Signature]

E-Mail: _____