

CERTIFICATION OF WORK

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

FACID/Building: NY053 MAIN PUMP HOUSE

Date of Visit: 9/18/20

Contractor Personnel on Site:

1. 5 worth

2. MTEG - Donnel

Work Performed:

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders -

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JACK WOOLRIDGE

Date: 9/19/20

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: Robert Bennett Date: 9/18/20
Signed: 
E-Mail:

TEST RESULTS SUBMITTED TO AUTHORITIES UPON RECEIPT OF PAYMENT.

We performed the following backflow device testing:

	Mfg	RPZ	DCV	Model	Size	Serial #	Pass	Fail	Pressure	Diff. Press.	Line	PSI	Price
1)	Wilkins	X		RP571	2	3428565	X		9.8	2.4	54		
	Meter #:			Reading:			Location: Brick Shelf						
2)	Wilkins	X		RP571	3	1908577	X		8.4	2.4	56		
	Meter #:			Reading:			Location: Main St. - Water Down						
3)	Wilkins	X		RP571	6	198130	X		9.2	2.4	68		
	Meter #:			Reading:			Location: Brick Shelf						
4)	Wilkins	X		RP571	6	198130	X		10.4	3.6	68		
	Meter #:			Reading:			Location: Brick Shelf						
5)													
	Meter #:			Reading:			Location:			Subtotal		\$	

We performed the following repairs:

	Subtotal	\$

Remarks:

	Sales Tax	\$
	Pay This Amount	\$
BALANCES DUE OVER 60 DAYS WILL BE CHARGED INTEREST.		Received by: 

