

18060 0662002

NOV PM
18060

FORMS

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

Replaces 5 Micro batteries to 5 Emergency Exit Signs,
all 5 were broken in the research center building.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: David B. Ruppel Date: 11/20/18
Signed: David B. Ruppel

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: Mike Mesenian Date: 20 Nov 2018
Signed: Mike Mesenian
E-Mail: michael.mesenian.ctr@mail.mil

J-02000000-05

CERTIFICATION OF WORK

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

FACID/Building: NY060 Date of Visit: Nov. 2018

Contractor Personnel on Site:

1. CMF, David Ruppe / #511012
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed:

DP (#10454)

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.) Asset #10454, #10453, #10455, #10456 respectively.

1. Both Kitchen Refrigerators, Freezer, Ice Machine
2. Break Room Ref/Freezer Side-by-Side Asset #10451
3. All Emergency Exit Illuminated Signs - Dual Light Wall Pads
4. Both 24 Hour dial Timers (Time clock); Asset #10499, #10536

Inspection, Testing, and Certification

1. _____
2. _____
3. _____
4. _____

Other Recurring Services

1. _____
2. _____
3. _____
4. _____

Service Calls - Service Call Number and Description

1. None
2. _____
3. _____