

CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: Pa081-227 Date of Visit: 9-19-19

Contractor Personnel on Site:

1. Dominic Stango
2. _____
3. _____
4. _____

Work Performed:

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

1. work 1012 asset# 5012 there are only 2 vfd's
2. for pumps
3. _____
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Dominic Stango Date: 9-19-19
Signed: ~~Dominic Stango~~

To be signed by Facility Manager:

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:

Print Name/Rank: _____ Date: _____

Signed: _____

E-Mail: _____

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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FACID/Building: PA051-227 Date of Visit: 9-19-19

Contractor Personnel on Site:

1. Dominic Stango 3. _____
2. _____ 4. _____

Work Performed:

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

1. work# 10792, 10937,
2. _____
3. _____
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Dominic Stango Date: 9-19-19
Signed: D. Stango

To be signed by Facility Manager:

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:

Print Name/Rank: Al Maynard Date: 9/19/19
Signed: Al Maynard

E-Mail: _____