

NOT ON LIST

PA 1166-01

CERTIFICATION OF WORK

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

FACID/Building: ~~PA 1166-01~~

Date of Visit: 2/23/18

Contractor Personnel on Site:

1. JIM McELHINNY

2. M-009 M3QT
5-106139

Work Performed:

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

1. WO# REPLACEMENT VALVE

Service Calls - Service Call Number and Description

1. CSS# 3/4" WATTS RP-FAL VENT OPENS UNDER 2 PSI

2. CSS#

3. CSS#

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JIM McELHINNY

Date: 2/23/18

Signed: Jim McElhinny

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:

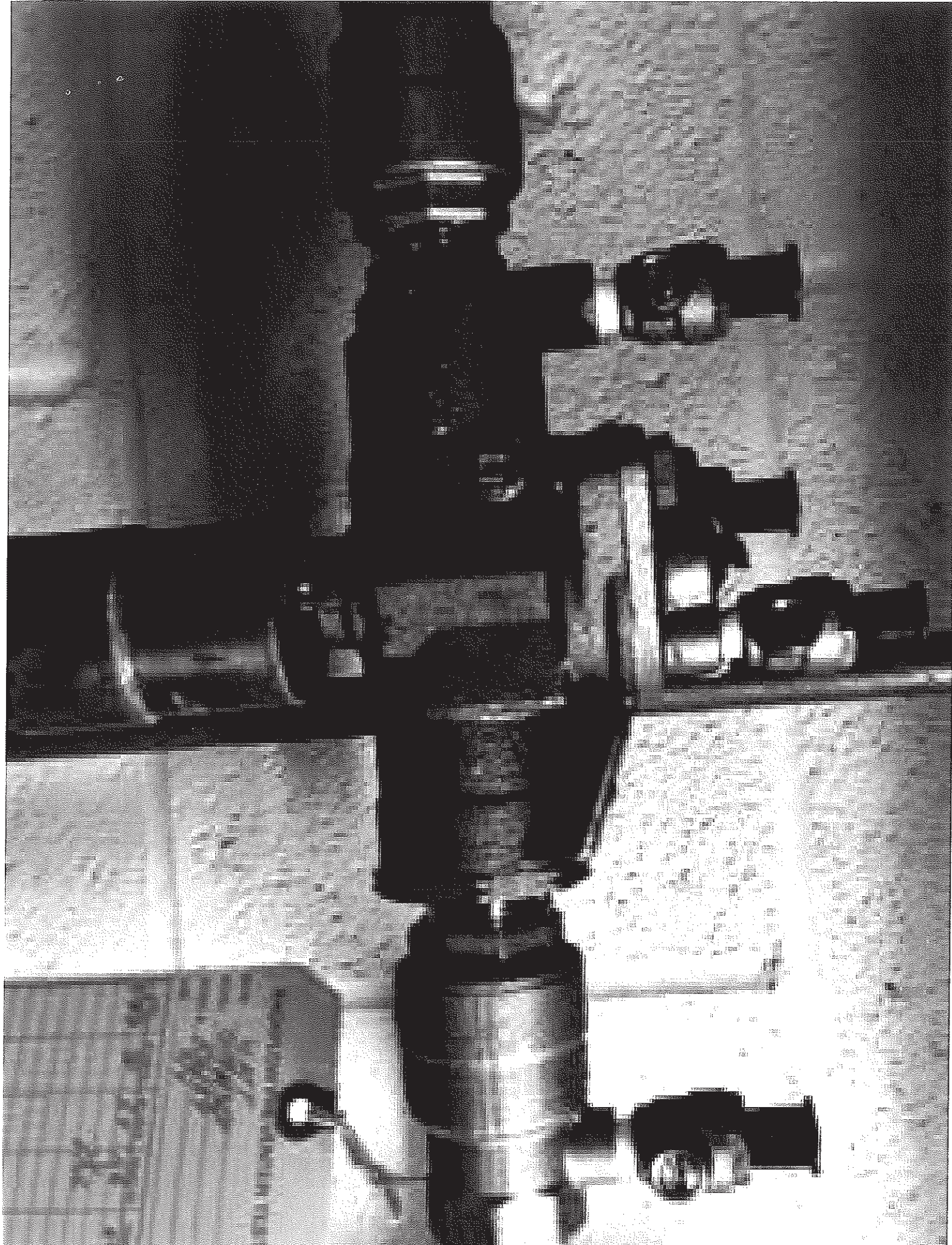
Print Name/Rank: TIMOTHY S. PETERS

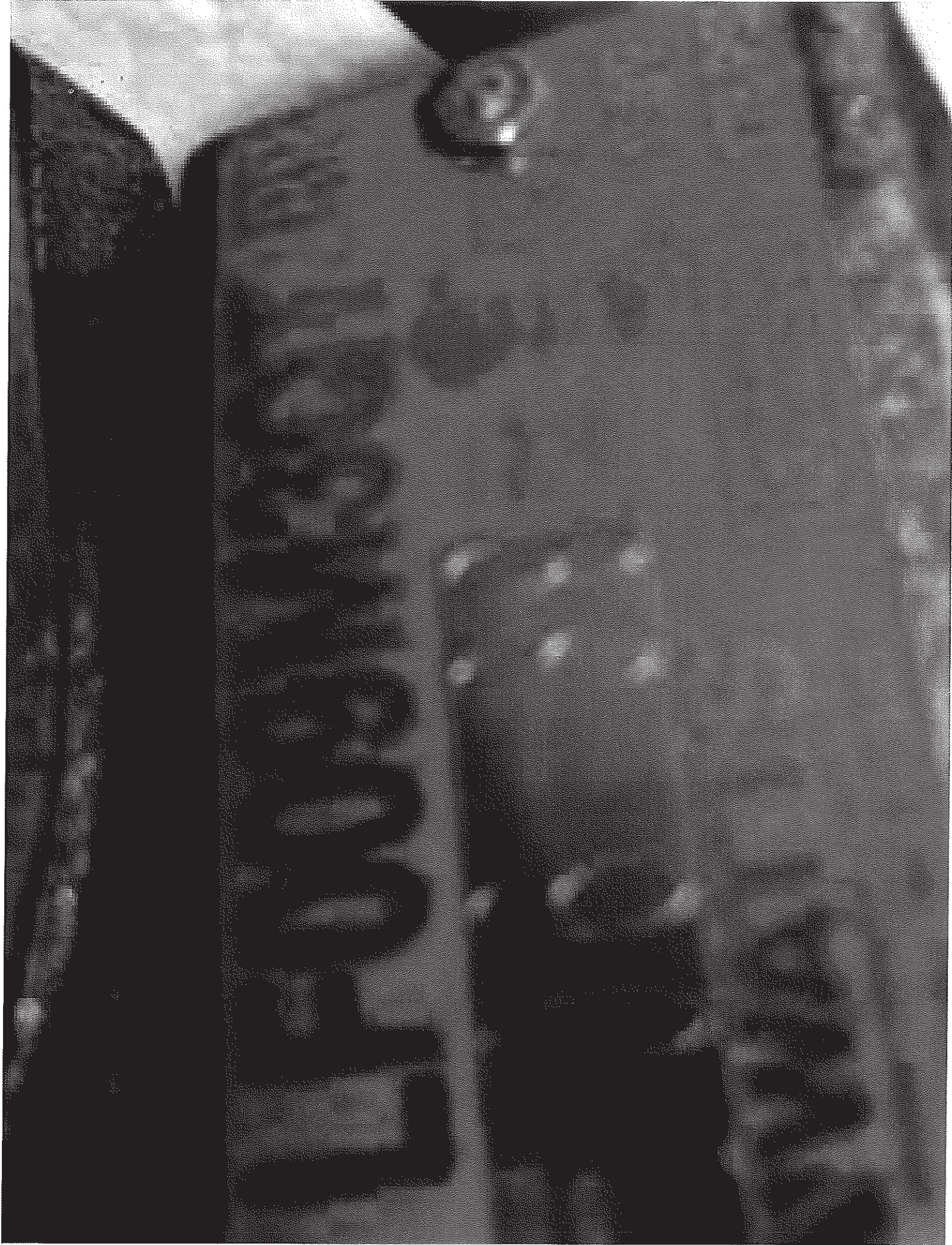
Date: 23 FEB 2018

Signed:

Timothy S. Peters

E-Mail: timothy.s.peters3.ctr@mail.mil





CERTIFICATION OF WORK

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

FACID/Building: PA 166-01 Date of Visit: 2/28/18

Contractor Personnel on Site:

1. JIM McELHINNY 2. _____

Work Performed:

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

1. WO# 1" WATTS M-309M2QT 5-116112

Service Calls - Service Call Number and Description

1. CSS# NOT ON LIST PASS
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JIM McELHINNY Date: 2/28/18

Signed: Jim McElhinny

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: TIMOTHY S PETERS Date: 23 FEB 2018

Signed: Timothy S Peters

E-Mail: timothy.s.peters 3. ctr @ mail.mil

FLOW PREVENTER TEST

WATTS
009M2GT
1/6/12

	B1 CHECK	B2 CHECK	RELIEF PSI	PASSED
W	8.7	1.2	3.4	YES



