

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY030 Date of Visit: 5/19/23

Contractor Personnel on Site:

1. Patrick Brown      3. \_\_\_\_\_  
2. \_\_\_\_\_      4. \_\_\_\_\_

**Work Performed:**

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

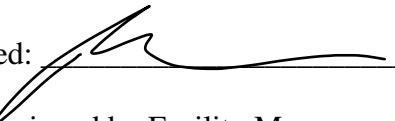
1. WO#'S , 12591 , 12592 , 12590 , 12694 ,  
2. ASSET#'S , G005 , G006 , G004 , 3211 ,  
3. 3225 , 3230 , 6656 , 6657 , 6658 , 6660 ,  
4. 6662 , 6663 , 6664 , 6665 , 6666 , 6667  
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 5/19/23

Signed: 

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: JOHN GRANATA Date: 5/19/23

Signed: 

E-Mail: \_\_\_\_\_