

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY070 Date of Visit: 9/20/23

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Patrick Brown</u> | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

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

1. WO#'S , 13698 , 13696 , 13755 , 13756 , 13783 , 13697 ,
2. 13758 , 13759 , 13830
3. ASSET#'S , G015 , G013 , 4833 , 4834 , 4835 , 4836 , 4850 ,
4. 4851 , 4852 , 4864 , 4930 , 4933 , 4941 , 4985 , 4986 , 4989 ,
5. 4837 , 4862 , 4863 , 4630 , 4631 , 4632 , 4658 , 4675 , 4681 ,
6. G014 , 4854 , 4855 , 7480,

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 9/20/23

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 F. Granata AFOS Date: 09/20/2023

Signed: 

E-Mail: john.f.granata.ct@army.mil