

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: \_\_\_\_\_ Date of Visit: 9/22/23

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. <u>WO#'S , 13699 , 13779 , 13811 , 13700 , 13814 ,</u>      |
| 2. <u>13701</u>  |
| 3. <u>ASSET#'S , G019 , 5011 , 5115 , 5116 , 5117 , 5118 ,</u> |
| 4. <u>5119 , 5162 , G020 , 5199 , G021</u>                     |
| 5. _____   |

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 9/22/23

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: 09/22/2023

Signed: John F. Granata

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