

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

1/9/24

FACID/Building: NY 010 Date of Visit: \_\_\_\_\_

Contractor Personnel on Site:

**Bill Davis**

1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

**Work Performed:**

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

1. **WO 14562 Asset G001**

1. **WO 14644 Asset 3953**

2. **WO 14709 Asset 7098**

**WO 14733 Asset G083**

3. **WO 14563 Asset G002**

4. **WO 14695 Asset 4504 & 4558**

**WO 14564 Asset G003**

5. **WO 14701 Asset 4576**

**CERTIFICATION OF WORK**

To be signed by the Contractor:

**Bill Davis**

Print Name: \_\_\_\_\_ Date: 1/9/24

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: 01/22/2024

Signed: 

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