

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY126 Date of Visit: 8/11/23

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 , 13448 , 13480 , 13546 , 13575 ,
2. 13450 , 13481 , 13572 , 13482
3. ASSET#'S , 3118 , 3137 , 3143 , 3164 ,
4. G019 , 6805 , 6907 , 6912 , 6993 , 7037 ,
5. 3136 , G020 , 6984 , 6985 , GO21

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 8/11/23

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: 8/11/23

Signed: 

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