

## CERTIFICATION OF WORK

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

FACID/Building: WV005-01 \_\_\_\_\_ Date of Visit: 1-16-19

Contractor Personnel on Site:

1. \_\_\_\_\_ 2. \_\_\_\_\_

**Work Performed:****Preventive Maintenance** - (Annual, Quarterly, Monthly, equipment identification, etc.)  
**Service Orders** -

PM/SO	WO #	Asset #	PM #	Asset Description
	7021	7683		J-1502000-52 1-pc Overhead Door, Steel, Roll Up, 12Wx12H
	6912	7444		J-1502000-45 3-pc Double Light, Pole Mounted Aluminum
	6912	7474		J-1502000-45 9-pc Flood Light, Pole Mounted Aluminum
	7004	7590		J-1502000-49 1-pc Single Gate Manual Sliding Exterior
	7004	7818		J-1502000-52 2-pc Overhead Door, Steel, Roll Up, 12Wx14H

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

To be signed by Facility Manager:

I certify that the above-named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: Mullins Farcy Date: \_\_\_\_\_Signed: [Signature]

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