

CERTIFICATION OF WORK

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

FACID/Building: WV046

Date of Visit: 2/28/19

Contractor Personnel on Site:

1. Ray Chain
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed:

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

1. _____
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. _____
2. _____
3. _____
4. _____

Other Recurring Services

1. _____
2. _____
3. _____
4. _____

Service Calls – Service Call Number and Description

1. 7586 Diagnose Part B washer
2. 7587 Diagnose Lube System issues
3. 7589 Diagnose AIR valve on Oil Recovery System

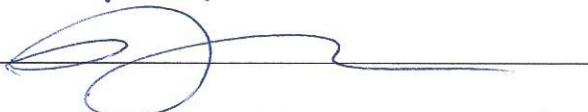
Description of Problem

Over and Above Repair Work – Order Number and Description of Work Completed

7587 Lube - BAY 2/3 Lenskit Hose BAY 6/7 Screen Broken. Yellow
BAY 6/7 worn smy Locked Bkt BAY 6/7 Blue worn smy
BAY 3/4 15/16 Blue Broken Screen (And) Blue Hose Lents
BAY 3/4 15/16 - Yellow Doesnt work
7587 Lube Pump Area - NEED 4 New O-Ring, All 4 regulation links
Oil Recovery - AIR valve Does not shut when tank is full - Spill Risk!
Parts washer - Rotation motor seized, Electronic Controls Burned up
7586

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ray Chan Date: 2/28/19
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: Dwayne Felton WG08 Date: Feb 28, 2019
Signed: 
E-Mail: dwayne.a.felton4.civ@mail.mil