

temperature check bldg 208-356-358

CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: ny024 Date of Visit: 12-2021

Contractor Personnel on Site:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

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

1. bldg 208 -3rd Floor 51 degrees 21%
2. 2nd floor 53 degrees 53%
3. 1st floor room 107-53 degrees 24%
4. bldg 356 1st floor 54 degrees 27,4%
5. bldg 358-room 108 classroom #1-50 degrees-28,5%

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ramon V Date: 12-7-2021

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: Anthony Jackson Date: 12-7-2021

Signed: _____

E-Mail: _____

