

### CERTIFICATION OF WORK

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

FACID: \_\_\_\_\_

Building: \_\_\_\_\_

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

Contractor Personnel on site:

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

Contractor Personnel on site:

Date of Visit: \_\_\_\_\_

Work Order Date: \_\_\_\_\_

CSS: \_\_\_\_\_

WO: \_\_\_\_\_

Service Order: ☐

Corrective Maintenance: ☐

#### Service Order Work Performed:

Unit: \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Model: \_\_\_\_\_

Serial: \_\_\_\_\_

#### Description:

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#### Repairs

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To be signed by the Contractor:

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

Date: \_\_\_\_\_

  
Signature: \_\_\_\_\_

Digital Signature:

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 work listed:

Print Name/Rank: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Digital Signature: