

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

FACID/Building: WV006 Date of Visit: 04-03-24

Contractor Personnel on Site:

1. Mike Coraley 2. Mike House

Work Performed:

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

1. _____

Service Calls – Service Call Number and Description

1. CSS# 97440- Emergency WO to clear main sewer line in AMSA
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Rhonda Marino Date: 4.5.24

Signed: Rhonda Marino

To be signed by Facility Manager:

By signing the Certification of Work, 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. This is NOT a Certification that the Work was performed correctly – The COW simply verifies that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: Thomas Mcburney Date: 4/4/24

Signed: TM

E-Mail: _____