



## Service Items

Name	Description	Tier 1 Price	Unit Type	QTY	Taxable
Labor	See attached pages for details of work performed.	\$0.00	Hour	1	N
<b>TOTAL*:</b>	<b>\$0.00</b>				

\* Not including taxes



## Service Forms

**Daily Form** Fill out every day, even on PMs, and projects

**TECH NAME** Caleb Kopp

**DATE** 7/23/25

**POINT OF CONTACT:**

**DESCRIPTION OF WORK PERFORMED** Completed Insulation Installation

**TOOLS USED** Lift

**MATERIALS USED OR** Insulation

**PICTURE OF TAG\***

**HOURS** REGULAR:

OVERTIME:



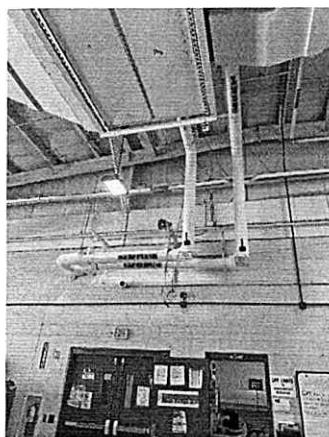
## Attachments

**Title**

IMG\_1245

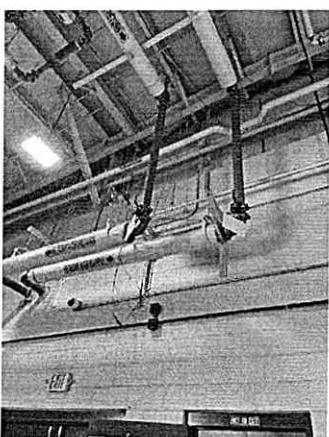
**File Name**

IMG\_1245.jpg



pic

pic.jpg



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

FACID/Building: PA118 Date of Visit: 7/23/25

Contractor Personnel on Site:

1. Caleb Kopp 2. \_\_\_\_\_

**Work Performed:**

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

1. Insulation Installation

**Service Calls – Service Call Number and Description**

1. CSS# FEMS3189887 WO 19153 PO#0001906  
2. CSS# \_\_\_\_\_  
3. CSS# \_\_\_\_\_

---

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Caleb Kopp Date: 7/23/25

Signed: Caleb Kopp

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 that someone representing the Contractor was onsite and accomplished something

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

Signed: 

E-Mail: scott.w.kawski.civ@army.mil