

CERTIFICATION OF WORK

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

FACID/Building: PA118 Date of Visit: 4/28/25

Contractor Personnel on Site:

1. Fisher Stewart
2. Travis Adams

Work Performed:

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

1. replaced pulleys on door 16 and replaced cables

Service Calls – Service Call Number and Description

1. FEMS# 3031114 WO# 17988
2. FEMS# _____
3. FEMS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Fisher Stewart Date: 4/28/25Signed: [Signature]

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 somethingPrint Name/Rank: Benjamin L Shields GS-12 Date: 2025/04/28Signed: [Signature]

E-Mail: _____