

CERTIFICATION OF WORK

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

FACID/Building: Va12 AMSA 89 **Date of Visit:** 05/30/2025

Contractor Personnel on Site:

1. James Atkins 2. _____

Work Performed:

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

1. Installed 2 new pressure regulators on raw water intake on diesel fire pump and replaced 2 batteries

Service Calls – Service Call Number and Description

1. CSS# / WO# PO-0001312 - VA012 FEMS 3114098

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: James T Atkins Date: 06/30/2025

Signed: _____

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: Joseph W Lael Date: 05/30/2025

Signed: _____

E-Mail: joseph.w.lael.civ@army.mil

