

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

FACID/Building: _____ Date of Visit: 8/15/24

Contractor Personnel on Site:

1. Doug Kimble 2. Andrew Hogg

Work Performed: Installed Pot Feeder

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

1. _____

Service Calls – Service Call Number and Description

1. CSS# W0006 W014559 CSS 93824
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Rhonda Marin Date: 9/20/24
Signed: Rhonda Marin

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: 9/25/24
Signed: TM

E-Mail: _____