

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

FACID/Building: _____ Date of Visit: 10-28-24

Contractor Personnel on Site:

1. Jack Owens 2. Mike Owens

Work Performed:

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

1. Chemical Tank

Service Calls – Service Call Number and Description

1. CSS# / WO# _____
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jack Owens Date: 10-28-24

Signed: Jack Owens

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: Thelma Speight GS9 Date: 28 OCT 24

Signed: Thelma Speight

E-Mail: thelma.v.speight.civ@army.mil