

CERTIFICATION OF WORK

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

FACID/Building: Exit Gate at Training Center Date of Visit: 10/9/2024 10/15/2024
Contractor Personnel on Site: 10/10/2024 10/21/2024

1. Tony Patterson 2. Brenden Reynolds

Work Performed:

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

1. Replaced Gate Operator & necessary accessories + operator foundation.

Service Calls – Service Call Number and Description

1. CSS#/ WO# 98558 / 16599
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Patterson Date: 10/22/2024

Signed: Tony Patterson

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: 10/22/24

Signed: T Type text here

E-Mail: _____