

(To be completed by the Contractor and saved in the Contractor's CMMS)
FACID/Building: VA 001 Date of Visit: 5-16-25

Contractor Personnel on Site:

1. MARK BASS 2. _____

Work Performed:

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

1. ~~REPAIR~~ Repair Alpine Boiler Replace Burner Tube

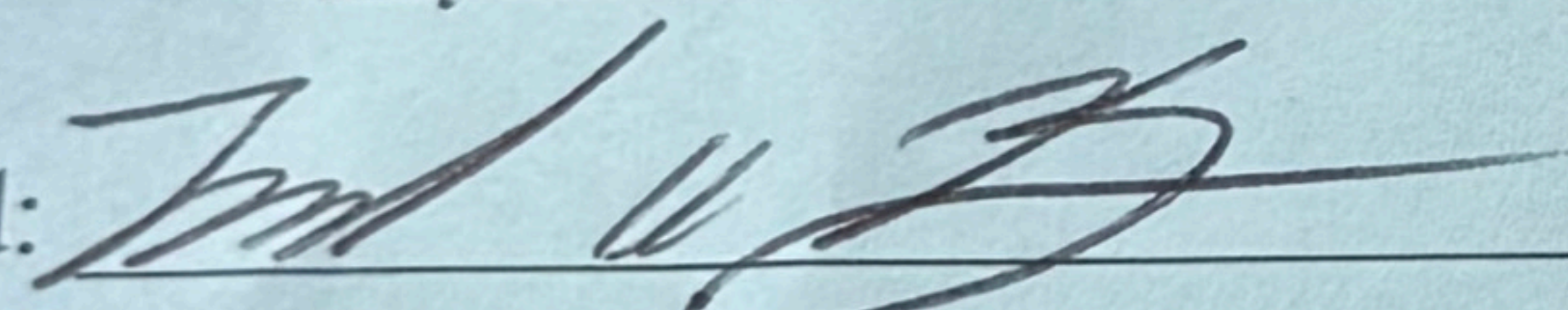
Service Calls - Service Call Number and Description

1. CSS# _____
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

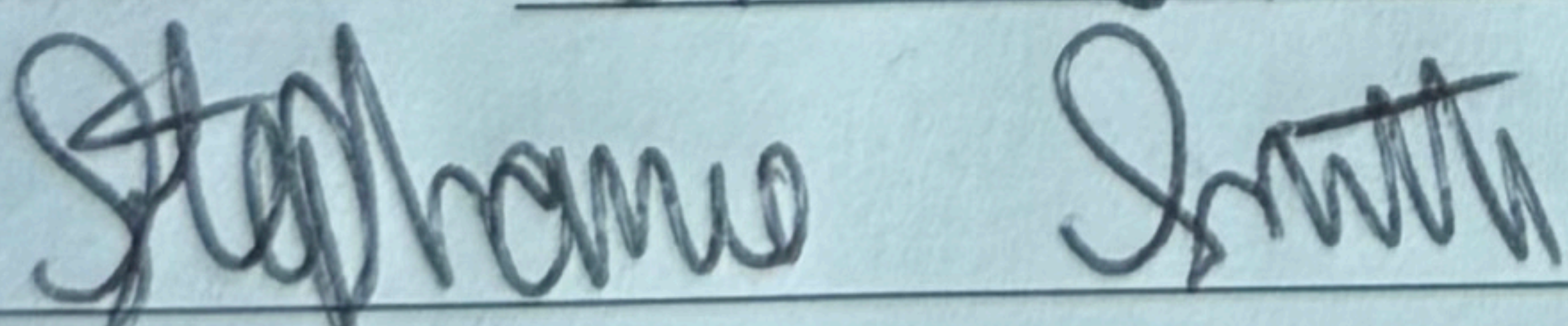
Print Name: MARK BASS Date: 5-16-25

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: SFC Smith, Stephanie Date: 5-19-25

Signed: 

E-Mail: Stephanie.C.Smith114.mil@army.mil