

CERTIFICATION OF WORK

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

FACID/Building: PA118 Date of Visit: 6-12-2025

Contractor Personnel on Site:

1. DAN JOHNSON 2. MATT DICKERHOOF

Work Performed:

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

1. FIRE PUMP SERVICE

Service Calls – Service Call Number and Description

1. CSS# 3114108
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: D. JOHNSON Date: 6-12-25

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: Michael Pennington Supervisor Date: 12 JUN 25

Signed: _____

E-Mail: michael.a.pennington.civ@army.mil