

CERTIFICATION OF WORK

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

FACID/Building: USAR PA118 Date of Visit: 2-18-2025

Contractor Personnel on Site:

1. Kevin Patron
2. Chris Hoffman

Work Performed:

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

1. _____

Service Calls – Service Call Number and Description

1. CSS# WO18255 FEMS3031057- Investigate status of alarm system.
2. CSS# Bad Edwards smoke detector located , model is Edwards SIGA-SD
3. CSS# in duct. Recommend return trip with replacement unit.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Chris Hoffman Date: 2-18-2025

Signed: *Chris Hoffman*

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: _____ Date: _____

Signed: _____

E-Mail: _____

