

### CERTIFICATION OF WORK

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

FACID/Building: Jane Lee Date of Visit: 10/17/18

Contractor Personnel on Site:

1. \_\_\_\_\_ 2. \_\_\_\_\_

#### Work Performed:

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

1. WO# \_\_\_\_\_

#### Service Calls - Service Call Number and Description

1. CSS# 14872 - 3 Pole Lights out
2. CSS# \_\_\_\_\_
3. CSS# \_\_\_\_\_

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### CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: John G. Lee Date: 2018 10 18

Signed: [Signature]

To be signed by Facility Manager:

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:

Print Name/Rank: Yokum, Shane Date: 2018 10/17

Signed: [Signature]

E-Mail: shane.j.yokum@va.gov