

CERTIFICATION OF WORK

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

FACID/Building: 8233822 Date of Visit: 8-22-18

Contractor Personnel on Site:

1. Sean O'Neill 2. _____

Work Performed:

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

1. WO# COM0089664

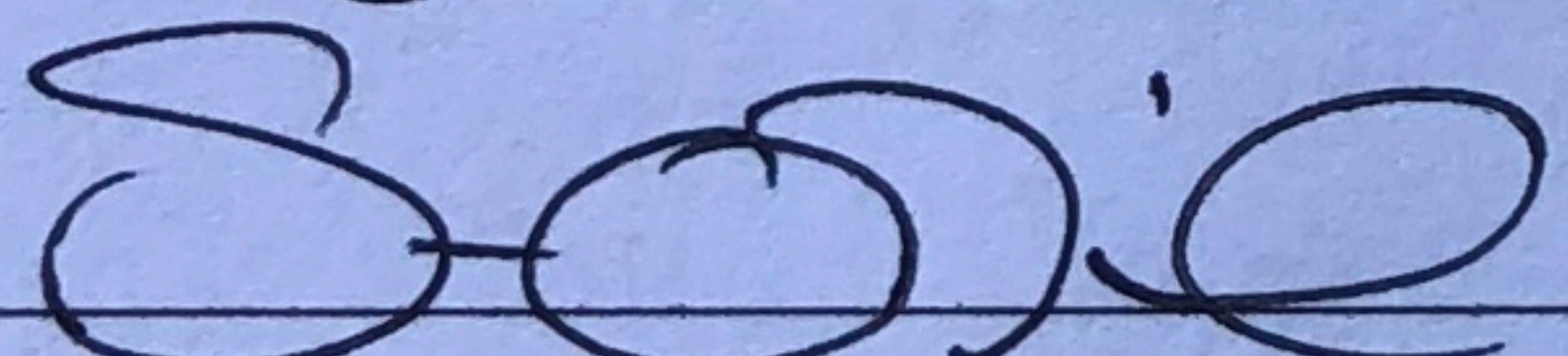
Service Calls – Service Call Number and Description

1. CSS# 15179 - Boiler Fuel level Alarm (disable)
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

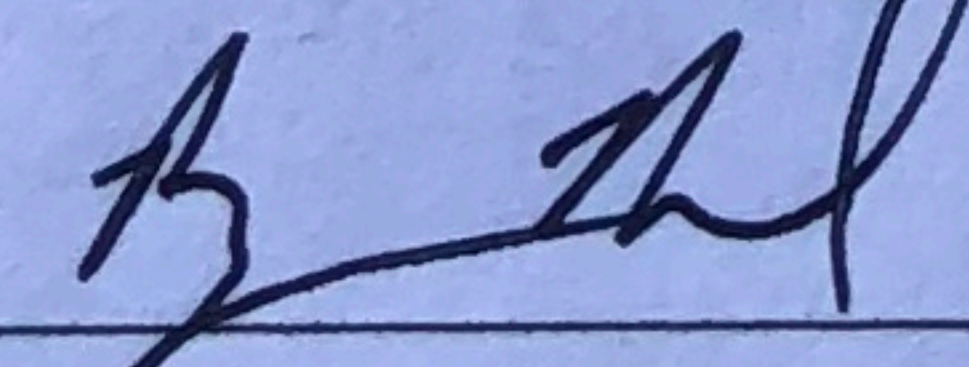
Print Name: Sean O'Neill Date: 8-22-18

Signed: 

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: Bryan Beard WS09 Date: 22 Aug 2018

Signed: 

E-Mail: bryan.d.beard.civ@mail.mil