

CERTIFICATION OF WORK

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

FACID/Building: PA079 Date of Visit: 7 Jan 19

Contractor Personnel on Site:

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

Work Performed: Shut the water off to the H.W.T and installed new expansion tank and a relief valve

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

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

Service Calls - Service Call Number and Description

1. CSS# 16447

2. CSS# \_\_\_\_\_

3. CSS# \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Bozon Martinovich Date: 1-4-19

Signed: Bozon Martinovich

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: Josh Sutton Date: 7 Jan 19

Signed: J Sutton

E-Mail: joshua.e.sutton2.civ@mail.mil





