

CERTIFICATION OF WORK

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

FACID/Building: MD - 021 Date of Visit: 2/13/2020

Contractor Personnel on Site:

1. Bord Water - Paul Grammanco
2. _____
3. _____
4. _____
5. _____
6. _____

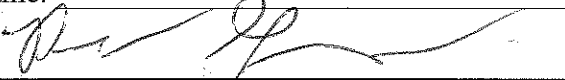
Service Calls – Service Call Number and Description

1. Quarterly Service Visit
2. _____
3. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Paul Grammanco Date: 2/13/2020

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Ken Augustin Date: 26FEB2021

Signed: _____

E-Mail: kenneth.p.augustin.civ@mail.mil