

### CERTIFICATION OF WORK

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

FACID/Building: WV007-01\_\_\_\_\_ Date of Visit: \_\_\_\_\_

Contractor Personnel on Site:

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

#### Work Performed:

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

**Service Orders** -

PM/SO	WO #	Asset #	PM #	Asset Description
	6735	4498	PM-SA-4498	J-1502000-08 2-pc Unit Heater, Electric, Wall Mounted
	6735	4517	PM-SA-4498	J-1502000-08 2-pc Unit Heater, Gas, Suspended

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To be signed by the Contractor:

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

E-Mail: \_\_\_\_\_