

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

FACID/Building: WV002 Date of Visit: 10-9-2024

Contractor Personnel on Site:

1. Brian Mcderment 2. _____

Work Performed:

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

WO-16772 G049, WO-16821 G104, WO-16773 G050,

1. WO-16806 4464, WO-16822 G105

Service Calls – Service Call Number and Description

1. CSS# October Pm
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Mcderment Date: 10-9-2024

Signed: Brian Mcderment

To be signed by Facility Manager:

By signing the Certification of Work, 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.

This is NOT a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: A Choate Date: 10-9-2024

Signed: A Choate _____

E-Mail: _____

