

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

FACID/Building: WV035 Date of Visit: 2-2-2023

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)
Completed installation of 3 P tacs in building 2 and diagnosed 4 ptacs
1. in building 1. _____

Service Calls – Service Call Number and Description

1. CSS# 87316
2. CSS# _____
3. CSS# _____

WO11807

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Mcderment Date: 2-2-2023

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: Mike SSG Date: 2-2-2023

Signed: Mike

E-Mail: _____

