

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

FACID/Building: MD 005 Date of Visit: 12/17/18

Contractor Personnel on Site:

1. Doug Moore
2. _____
3. _____
4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. 3482 / 13162, Motor starter install
2. MC Cable to Chiller pump
3. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Doug Moore Date: 12/12/18

Signed: Doug Moore

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: Jason Gavin Date: 12/17/18

Signed: Jason Gavin

E-Mail: jason.d.gavin.ctr@mail.mil





