

CERTIFICATION OF WORK

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

FACID/Building: M0002

Date of Visit: 9.23.19

Contractor Personnel on Site:

1. Brian Davis

2. _____

3. _____

4. _____

5. _____

6. _____

WO# 10145

CSS# 14008

Service Calls - Service Call Number and Description

1. Chiller motors burnt out

2. _____

3. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name:

Brian Davis

Date:

9.23.19

Signed:

[Signature]

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:

Name/Rank:

[Signature]

Date:

ed:

Christopher Huebler



XXXXXXXXXXXX
CANADA 167

Model	Serial	Lot	Color	Capacity	Resolution	ISO	Frame Rate	Shutter Speed	Aperture	Flash	Microphone	Video	Audio	Image	Size	Weight	Dimensions	Power	Accessories
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

100%

