

CERTIFICATION OF WORK

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

FACID/Building: MD 19

Date of Visit: 8.22.19

Contractor Personnel on Site:

1. Brian Davis
2. _____
3. _____
4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. Ch.11m Insulation after repair
2. _____
3. _____

WOT# 10122 CSS: 15569

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Davis Date: 8.22.19

Signed: Brian Davis

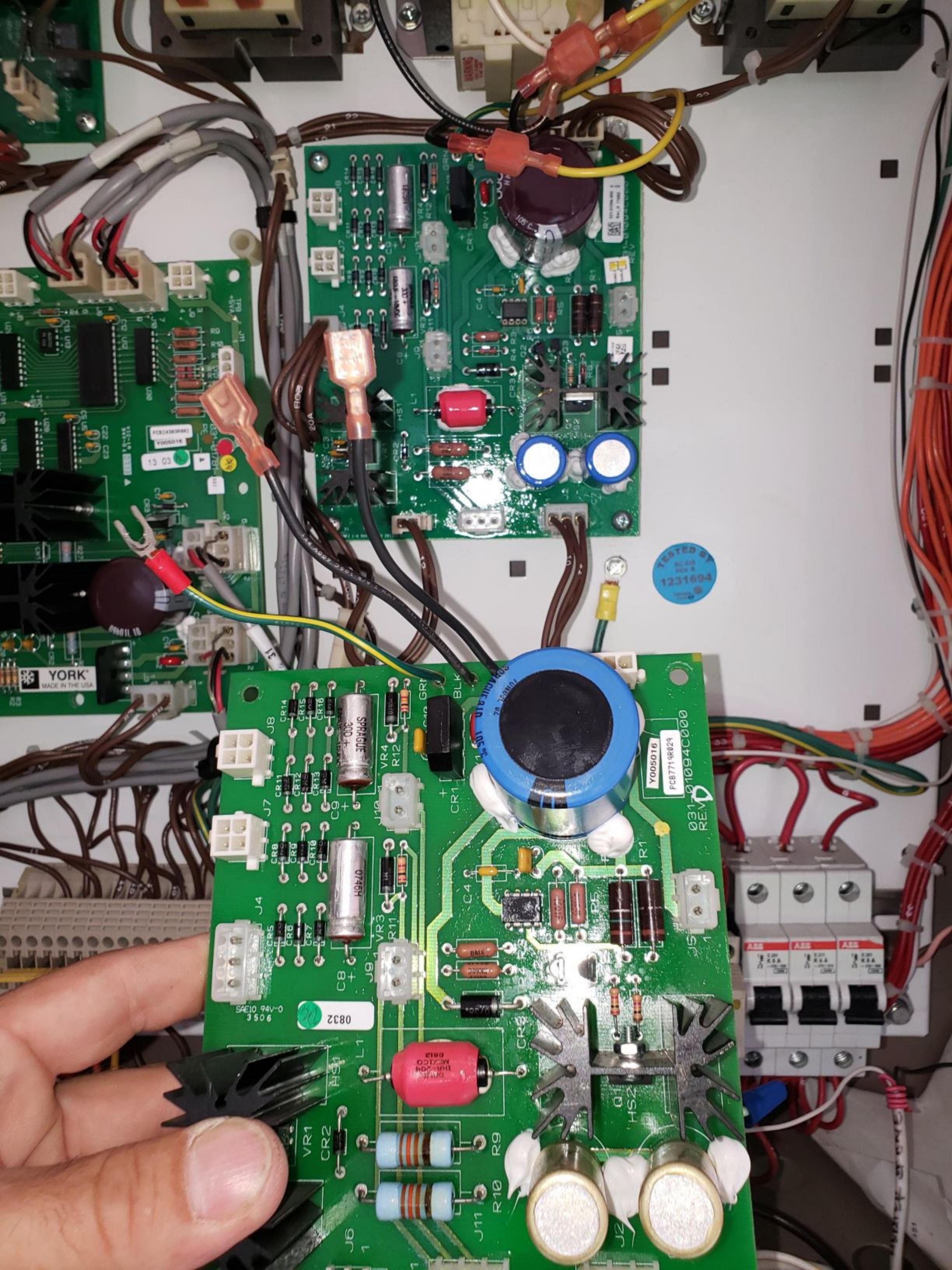
To be signed by Facility Manager:

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: SFC WILLCOUGHBY Date: 22 AUG 2019

Signed: Ryan M. Willoughby

E-Mail: ryan.m.willoughby3.mil@mail.mil



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RCHLT = 65.2 °F

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1

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4

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To be signed by Facility Manager:

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Print Name/Rank: SFC WILLCOUGHBY Date: 22 AUG 2019

Signed: Ryan M. Willoughby

E-Mail: ryan.m.willoughby3.mil@mail.mil