

CERTIFICATION OF WORK

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

FACID/Building: ARMY RESERVE CENTER Date of Visit: 5/28/19

Contractor Personnel on Site:

1. DAVID NELSON
2. JOSE PEREZ

Work Performed: INVESTIGATE ROOF LEAK AND EVALUATE ROOF CONDITION  
AND CORE CUT ROOF. WALKED ROOF FOR INSPECTION OF ENTIRE ROOF.

Service Call:

1. WO# \_\_\_\_\_

Service Calls – Service Call Number and Description

1. CSS# 18868
2. CSS# \_\_\_\_\_
3. CSS# \_\_\_\_\_

Please take pictures

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To be signed by the Contractor:

Print Name: DAVID NELSON Date: 5/28/19  
BAKER ROOFING OF HARRISONBURG, VA.

Signed: [Signature]

To be signed by Facility Manager:

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:

Print Name/Rank: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

E-Mail: \_\_\_\_\_