

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

FACID/Building: NY023 Date of Visit: 7/1/2019

Contractor Personnel on Site:

1. Michael Sarro 2. \_\_\_\_\_

**Work Performed:** *Investigate Lighting fixture in egress area Building 118*

**Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)**

1. WO# 2-4710

**Service Calls – Service Call Number and Description**

1. CSS# 19796  
2. CSS# \_\_\_\_\_  
3. CSS# \_\_\_\_\_

Pictures are required (Before and After)

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**CERTIFICATION OF WORK**

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To be signed by the Contractor:

Print Name: Michael Sarro Date: 7/1/2019

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

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: Louis Corbo Date: 7-1-19

Signed: Louis Corbo

E-Mail: Louis.192.Corbo@tire.com