

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

FACID/Building: MD005

Date of Visit: 11/19/2019

Contractor Personnel on Site:

1. Brian Davis

4. _____

2. _____

5. _____

3. _____

6. _____

Service Calls – Service Call Number and Description

1. Checked operations of all Boilers

2. _____

3. _____

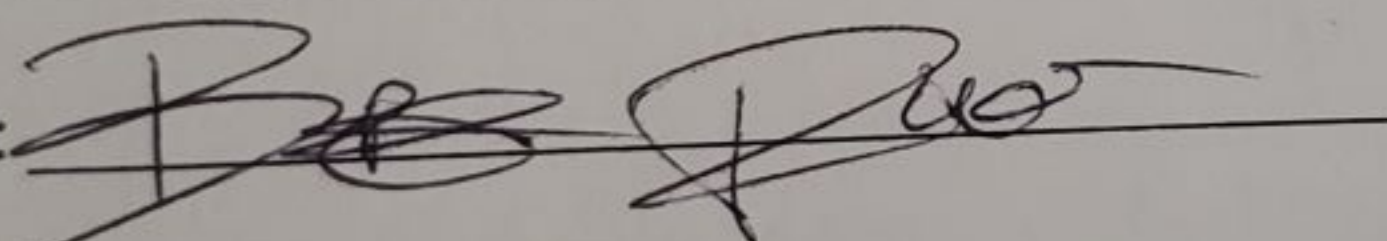
WO# 11411 CSS# 21094

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Davis

Date: 11/19/19

Signed: 

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: _____

Date: _____

Signed: _____

E-Mail: _____

