

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

FACID/Building: MD 002

Date of Visit: 11/6/19

Contractor Personnel on Site:

1. Doug Moore

4. _____

2. _____

5. _____

3. _____

6. _____

Service Calls – Service Call Number and Description

1. WO# 11248, CSS# 22093 - Mail room ceiling Job Walk thru
2. WO# 11245, CSS# 22037 - Johnson Controls C&S run
3. _____

WO# _____ CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Doug Moore

Date: 11/6/19

Signed: D. Moore

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: Brian Wharton / AS11

Date: 11/6/19

Signed: B. Wharton

E-Mail: Brian.WWharton.civ@mail.mil





Handwritten notes on a yellow sticky note, including the number '5' and some illegible text.

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