

CERTIFICATION OF WORK

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

FACID/Building: DE007

Date of Visit: DEC 19, 2019

Contractor Personnel on Site:

1. CHRIS TROTTER

4. _____

2. _____

5. _____

3. _____

6. _____

Service Calls - Service Call Number and Description

1. TIGHTENED FITTINGS ON CHILLED WATER LINES

2. _____

3. _____

WO# 11255 CSS# 22109

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: CHRIS TROTTER

Date: 12/19/19

Signed: [Signature]

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: Cox J. M. MSG

Date: 19 DEC 19

Signed: [Signature]

E-Mail: job-w.cox1.wil@mail.mil



