

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

FACID/Building: MDO05 Date of Visit: 1/8/2020

Contractor Personnel on Site:

1. <u>Brian Davis</u>	4. _____
2. _____	5. _____
3. _____	6. _____

Service Calls – Service Call Number and Description

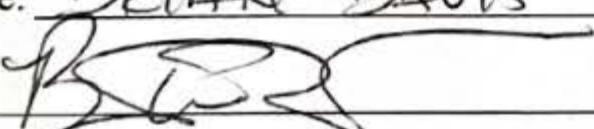
1. <u>11472/22994 - Reset BMS, checked good</u>
2. <u>11420/22669 - Opened valves to allow water to flow through</u>
3. _____

WO# _____ CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: BRIAN DAVIS Date: 1. 8. 2020

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: Ken Augustin Date: 13 JAN 2020

Signed: 

E-Mail: kenneth.p.augustin.civ@mail.mil

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E SERIES

