

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

FACID/Building: DE 02

Date of Visit: 10/19/2020

Contractor Personnel on Site:

1. Brian Davis
2. _____
3. _____
4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. Pix hoses and Replaces and fitting
2. _____
3. _____

WO# 12746 CS# 25823

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Davis Date: 10/19/2020

Signed: Brian Davis

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: Shaun Allen Date: 10/19/2020

Signed: Shaun Allen

E-Mail: shaun.t.allen2.mil@mail.mil