

### CERTIFICATION OF WORK

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

FACID/Building: 356, NY 024 Date of Visit: 09/08-09/20

Contractor Personnel on Site: 1. Ari 2. \_\_\_\_\_

Work Performed: Roof & Plumbing Repairs

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)

Service Orders - CSS: 26233, W/O: 10231

| Asset # | Qty      | Asset Description  |
|---------|----------|--|
|         | <u>1</u> | <u>Seal Floor in Mechanical Room</u>                       |
|         | <u>2</u> | <u>Replace leaking piping + leaking fittings</u>           |
|         | <u>3</u> | <u>Replace stained ceiling Tiles in Room 123 305 area.</u> |
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### CERTIFICATION OF WORK

To be signed by the Contractor:

PrintName: Arian Kodra Signed: Arian Kodra Date: 09/08/20

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

PrintName/Rank: Vincent Giordano Date: Sept 8 2020

Signed: [Signature] E-Mail: \_\_\_\_\_