

CERTIFICATION OF WORK

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

FACID/Building: VA 006

Date of Visit: 3/9/21

Contractor Personnel on Site:

1. Advanced security
2. _____
3. _____
4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. ESS 29107 WO 13838
2. WO 12969 PM
3. _____

they don't have use code for Alarm to do PM check

CERTIFICATION OF WORK

need key for hold up Botten

To be signed by the Contractor:

Print Name: Daryash Hoffman Date: 3/9/21

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: Donald Wilson Date: _____

Signed: [Signature]

E-Mail: _____