

CERTIFICATION OF WORK

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

FACID/Building: M002

Date of Visit: 6-25-2021

Contractor Personnel on Site:

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

Service Calls – Service Call Number and Description

1. Remove and replace liquid level sensor
2. checked gauge
3. _____

WO #: 14353 CSS #: 30785

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: BRIAN DAVIS Date: 6-25-2021

Signed: Brian

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: CPT. E. Lynch, MCR Date: 20210625

Signed: E. Lynch

E-Mail: Mark.E.Lynch.MCR@mail.mil

