

CERTIFICATION OF WORK

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

FACID/Building: VA099

Date of Visit: DEC 2, 2021

Contractor Personnel on Site:

- | | |
|-----------------|----------|
| 1. <u>CHRIS</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Calls – Service Call Number and Description

1. W.O. # 15644 WALK JOB AND FIGURE PIPE LAYOUT
2. CSS # 33360 INSTALLED gas valve
3. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: CHRIS TROTTER

Date: 12/2/21

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: Ronan, Timothy P E5

Date: 12/2/2021

Signed: _____

E-Mail: Timothy.P.Ronan.mil@army.mil







WARNING
Hot surface
Do not touch

VULCAN