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

FACID/Building: MD019 Date of Visit: 1/18/22

Contractor Personnel on Site:

1. Josh Stephenson 4. _____
2. _____ 5. _____
3. _____ 6. _____

Service Calls – Service Call Number and Description

1. -Secured Boiler #1, #2, #3 to Concrete Pad, using Tap Co
2. ~~on all four Corners.~~
3. - Quest./Material list for Seperating gas regulator vents o
Seperating Condensed drain's + adding Filter housing on th

w/o # 15978 Secure boilers 15977 exhaust
CSS # 34098 34097

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Josh Stephenson Date: 1/18/22

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: SFC William Sparks Date: 1/18/22

Signed:

E-Mail: _____