

CERTIFICATION OF WORK

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

FACID/Building: VA001 Date of Visit: 7/5/23

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO13103 WO13139 WO13339 WO13104 JULY I

Service Calls – Service Call Number and Description

1. CSS# All FEs check out well with no issues.
2. CSS# Building 2 is missing FE'S and will need replaced.
3. CSS# U.S. Flag has been delivered.
Unit heaters and Circulating pumps check out well
-AS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 7/5/23

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, 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. This is **NOT** a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: Bonnie Parker Date: 7/5/23

Signed: 

E-Mail: Bonnie.b.parker.ctr@army.mi



