

CERTIFICATION OF WORK

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

FACID/Building: WV005 Date of Visit: 8/14/23

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO13436 WO13509 WO13552 AUG PN
WO13596 WO13510 WO13565

Service Calls – Service Call Number and Description

1. CSS# All PMs are complete and Fire Extinguishers check out
2. CSS# Filters have been changed and water heaters check out
3. CSS# No issues.
3. CSS# -AS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 8/14/23

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: Westley Thomsen Date: 8/14/23

Signed: 

E-Mail: _____



