

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

FACID/Building: VA033 Date of Visit: 12/13/23

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO14347 WO14401 DEC PI
WO14447 WO14348 WO14442



Service Calls – Service Call Number and Description

1. CSS# ASSET #3531 Exhaust Fan in Men's Bathroom is not working.
2. CSS# CSS# Requested
3. CSS# FE check out well in building 1 and One FE missing in building 2.
3. CSS# Filters changed.

-AS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 12/13/23

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: James Medley Date: 12/13/23

Signed: 

E-Mail: _____



