

CERTIFICATION OF WORK

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

FACID/Building: VA033 Date of Visit: 1/8/24

Contractor Personnel on Site:

1. Aaron Skeens
2. _____

Work Performed:

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

1. WO14600 WO14657 WO14716 JAN
WO14741 WO14601 WO14642 WO14704


Service Calls – Service Call Number and Description

1. CSS# 8 piece fan coil unit no longer exists in building 2. Unit heaters,
2. CSS# Fire Extinguishers, and pumps all check out well. Flag deliverce
3. CSS# -AS

CERTIFICATION OF WORK

To be signed by the Contractor:


Print Name: Aaron Skeens Date: 1/8/24

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: 1/8/24

Signed: 

E-Mail: _____

