

CERTIFICATION OF WORK

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

FACID/Building: VA012 Date of Visit: 2/5/24

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO14863 WO14903 WO14912 FEB F
WO14965 WO14864 WO14865

Service Calls – Service Call Number and Description

1. CSS# No Ice Makers at VA012.
2. CSS# New Refrigerator and Freezer needs installed.
3. CSS# Water heater and fire Extinguishers check out well
4. CSS# -AS



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To be signed by the Contractor:

Print Name: Aaron Skeens Date: 2/5/24

Signed: [Signature]

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: Bryan Beard Date: 2/5/24

Signed: [Signature]

E-Mail: _____



