

CERTIFICATION OF WORK

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

FACID/Building: VA039 Date of Visit: 3/13/24

Contractor Personnel on Site:

1. Aaron Skeens
2. _____

Work Performed:

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

1. WO15066 WO15141 WO15067 WO15171 MAR PI

Service Calls – Service Call Number and Description

1. CSS# 2 FE's replaced in building 1 and 1 replaced in building 2.
2. CSS# Carrier PTAC is out of service and needs replaced and
3. CSS# Relocated. Waiting on approval to change McQuey
Fan motor.
-AS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 3/13/24

Signed: _____

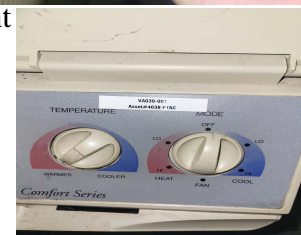
To be signed by Facility Manager:

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: Amy Choate Date: 3-13-2024

Signed: _____

E-Mail: _____



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