

CERTIFICATION OF WORK

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

FACID/Building: VA039 Date of Visit: 4/11/24

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO15290 WO15323 WO15355 WO15291 WO15345 APR
WO15356 WO15357

Service Calls – Service Call Number and Description

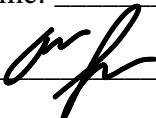
1. CSS# All FE check out with no issues.
2. CSS# Roof drains gutters check out without issues.
3. CSS# 8 piece fan coil units have been removed from building 2
-AS



CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 4/11/24


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: ARA Gregory Rasnick Date: 4/11/24

Signed: 

E-Mail: _____



