

CERTIFICATION OF WORK

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

FACID/Building: VA001 Date of Visit: 8/1/24

Contractor Personnel on Site:

1. Aaron Skeens
2. _____

Work Performed:

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

1. WO16232 WO16273 WO16303 WO16233 WO16234 AUG

Service Calls – Service Call Number and Description

1. CSS# All FE check out well with no issues.
2. CSS# Water heater checks out well with no issues.
3. CSS# Refrigerator, Freezer, and Ice Maker is out of commission
-AS



CERTIFICATION OF WORK

To be signed by the Contractor:

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

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: Valdes Date: 8/1/24

Signed: _____

E-Mail: _____



