

CERTIFICATION OF WORK

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

FACID/Building: VA001 Date of Visit: 3/1/2023

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. W012162 W011356 W012355 MAR PM

Service Calls – Service Call Number and Description

1. CSS# There are 9 FE's in total at VA001 in building 1 and 2 replacement
2. CSS# FE's are needed for building 2. PTAC Units check out well and all
3. CSS# checkpoints for the filter change have been complete.

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CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 3/1/2023

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: Michael Miller Date: 3/1/2023

Signed: 

E-Mail: _____