



CERTIFICATION OF WORK

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

FACID/Building: VA001 Date of Visit: 11/13/24

Contractor Personnel on Site:

1. Aaron Skeens 2. Jim Childers

Work Performed:

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

1. WO16956 WO16999 WO17036 WO16957 NOV PM



Service Calls – Service Call Number and Description

1. CSS# All FE check out well with no issues.
2. CSS# Trane Air Handler and Carrier Condenser have been replaced.
3. CSS# Trane is now a Daikin Air Handler. Carrier has been upgraded to a new Lenox unit. Freezer, Ice machine and refrigerator has been took out of commission with no plans for replacement.

CERTIFICATION OF WORK
-AS

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 11/13/24

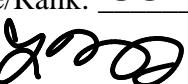
Signed: 



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: SGT Diamond Date: 11/13/24

Signed: 

E-Mail: _____



