

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

FACID/Building: VA039 Date of Visit: 11/12/24

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO16963 WO17012 WO16964 NOV PM

Service Calls – Service Call Number and Description

1. CSS# All FE in building 1 check out well
2. CSS# Filters changed and PM complete on ASSET #3047
3. CSS# Asset #3048 is Abandoned. All FE in building 2 check out.
-AS

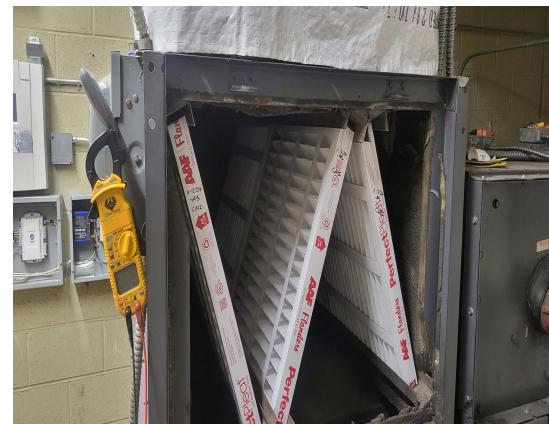


CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 11/12/24

Signed: 

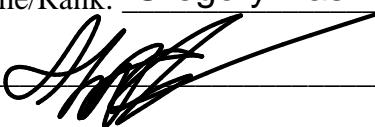


To be signed by Facility Manager:

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: Gregory Rasnick Date: 11/12/24

Signed: 

E-Mail: _____

