

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

FACID/Building: VA033 Date of Visit: 12/10/24



Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO17153 WO17210 WO17255 WO17256 WO17257 DEC PM
WO17258 WO17154 WO17251 WO17324

Service Calls – Service Call Number and Description

1. CSS# All FE's at this location check out well with no issues
2. CSS# Filters changed on rooftop package unit and mini splits.
3. CSS# All PMs complete with no issues.
-AS



CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 12/10/24

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: James Ware III Date: 12/10/24

Signed: 

E-Mail: _____



