

CERTIFICATION OF WORK

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

FACID/Building: VA033 Date of Visit: 2/6/25

Contractor Personnel on Site:

1. Aaron Skeens 2.

Work Performed:

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

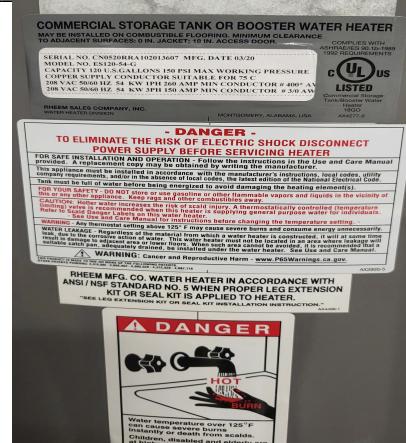
1. WO17779 WO17821 WO17844 WO17886 FEB PM
WO17897 WO17780 WO17858

Service Calls – Service Call Number and Description

1. CSS# All FE's check out well at VA033.
2. CSS# New ice Machine checks out well with no issues.
3. CSS# Water heaters checks out well with no issues
Old ice machine has been removed.
-AS



CERTIFICATION OF WORK



To be signed by the Contractor:

Print Name: Aaron Skeens Date: 2/6/25

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: Keith Jenkins Date: 2/6/25

E-Mail:

