



CERTIFICATION OF WORK

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

FACID/Building: VA012 Date of Visit: 3/5/25

Contractor Personnel on Site:

1. Aaron Skeens



Work Performed:

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

1. WO18069 WO18194 WO18070 WO18071 MAR PM



Service Calls – Service Call Number and Description

1. CSS# All FE in building 1 check out well. 1 FE in building 2 needs recharged or replaced. Trane RTU checks out flawlessly.
2. CSS# Filters replaced. 1 FE in building 3 checks out well.
3. CSS# -AS



CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 3/5/25

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: Jermaine soyka WSS Date: 3/5/25

Signed: 

E-Mail: Jermaine.c.soyka2.civ@army.m



