

CERTIFICATION OF WORK

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

FACID/Building: VA033 Date of Visit: 2/21/25

Contractor Personnel on Site:

1. Aaron Skeens
2. _____

Work Performed:

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

1. WO18261 FEMS3071003 No Heat in training building

Service Calls – Service Call Number and Description

1. CSS# Bad breaker needs replaced. Pump seals have failed.
2. CSS# Boiler overloading causing Breakers, seals and pumps to fail.
3. CSS# Hard lockout on front phase causing boiler to shut down.
-AS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 2/21/25

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: Jordan waugh GS 9 Date: 02/21/25

Signed: 

E-Mail: _____



