

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

FACID/Building: VA012 Date of Visit: 4/10/25

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO18354 WO18408 WO18355 WO18409 WO18356 APR PM

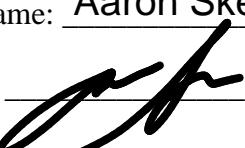
Service Calls – Service Call Number and Description

1. CSS# All FE check out well at VA012
2. CSS# All roof drains and gutters check out well with no issues.
3. CSS# -AS

CERTIFICATION OF WORK

To be signed by the Contractor:

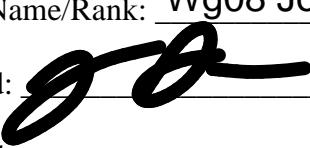
Print Name: Aaron Skeens Date: 4/10/25

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: Wg08 Johnny Amos Date: 4/10/25

Signed: 

E-Mail: _____

