

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

FACID/Building: VA001 Date of Visit: 27-AUG-2025

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO19571 WO19624 WO19661 WO19699 WO19625 AUG PM

Service Calls – Service Call Number and Description

1. CSS# Ice maker, freezer and refrigerator is out of commission.
2. CSS# Filters changed on AHU for Drill Hall. All FE check out well.
3. CSS# Water storage tank labeled water heeter PM complete.
-AS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 27-AUG-2025

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: SGT Diamond Date: 27-AUG-2025

Signed: 

E-Mail: _____

