

CERTIFICATION OF WORK

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

FACID/Building: VA033 Date of Visit: 20-NOV-2025

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO20391 WO20469 WO20480 WO20392 NOV PM

Service Calls – Service Call Number and Description

1. CSS# All FE check out well at VA033-01 and VA033-02.
2. CSS# Asset #9064 and asset #9065 2 piece Hoshizaki Ice Machine
3. CSS# PM complete with no issues. Operating Flawlessly. 10" x 15"
U.S. Flag has been delivered. Requesting # CSS to fix
broken faucet needs replaced in kitchen and bathroom.

-AS

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Elkay water fountains need filter

Replacement, not in contract. Last changed

Sep 2025 -AS

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 20-NOV-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: Jordan waugh GS 9 Date: 20-NOV-2025

Signed: 

E-Mail: _____

