

CERTIFICATION OF WORK

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

FACID/Building: VA039-02 Date of Visit: 22-JAN-2026

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO20973 OMS Hot water relief valve replacement

Service Calls – Service Call Number and Description

1. CSS# 3220241 Series 100XL 3/4 in. Brass MNPT x FNPT
2. CSS# 150# 210 Relief Valve
3. CSS# (4) Hrs Labor with a price total of \$52.92

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CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 22-JAN-2026

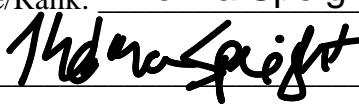
Signed: 

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: Thelma Speight Date: 22-JAN-2026

Signed: 

E-Mail: _____

