

CERTIFICATION OF WORK

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

FACID/Building: WV005 Date of Visit: 17-FEB-2026

Contractor Personnel on Site:

1. Aaron Skeens
2. _____

Work Performed:

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

1. WO20979 WO21069 WO21111 WO21165 WO21134 FEI

Service Calls – Service Call Number and Description

1. CSS# K Type FE located in building 1 replaced. All FE in Building 2
2. CSS# check out well with no issues. Filter change complete on
3. CSS# Trane gas furnace. Asset #3044 Reznor unit is abandoned.
PM complete on Tankless water heater and Electric water heater.
-AS

CERTIFICATION OF WORK

To be signed by the Contractor:

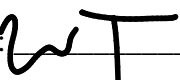
Print Name: Aaron Skeens Date: 17-FEB-2026

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: Wesley Thomsen Date: 17-FEB-2026

Signed: 

E-Mail: _____

