

CERTIFICATION OF WORK

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

FACID/Building: VA001-01 Date of Visit: 29-SEP-2025

Contractor Personnel on Site:

1. Aaron Skeens 2. _____

Work Performed:

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

1. WO20318 Sewer lines backed up in both male and female latrines.

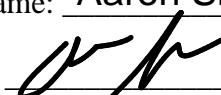
Service Calls – Service Call Number and Description

1. CSS# FEMS #3366325
2. CSS# latrines have been snaked and the clogs removed.
3. CSS# Showers have been cleaned.
-AS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Aaron Skeens Date: 29-SEP-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: 29-SEP-2025

Signed: 

E-Mail: _____

