

CERTIFICATION OF WORK

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

FACID/Building: Gaithersburg MD013 Date of Visit: 5/20/19

Contractor Personnel on Site:

1. Patrick Donovan 2. \_\_\_\_\_

**Work Performed:**

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

1. 8485, 8515, 8546, 8516, 8547

**Service Calls** – Service Call Number and Description

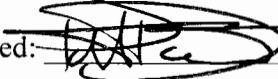
1. CSS# \_\_\_\_\_
2. CSS# \_\_\_\_\_
3. CSS# \_\_\_\_\_

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CERTIFICATION OF WORK

To be signed by the Contractor:

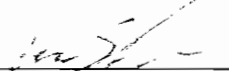
Print Name: Patrick Donovan Date: 5/20/19

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:


Print Name/Rank: ARF. STANLEY G. GRIFFIN Date: 5/20/19

Signed: 

E-Mail: arthur.stanley.griffin@usda.gov



SITE AND BLDG #: Gaitherburg MD013  
LOCATION/RM #: Mezz WO# 8546

MECHANIC SIGNATURE:  DATE: 5/20/19

START TIME: 10:00 FINISH TIME: 10:45

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