

## CERTIFICATION OF WORK

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

FACID: \_\_\_\_\_

Date of Visit: \_\_\_\_\_

Work Order Date: \_\_\_\_\_

Building: \_\_\_\_\_

CSS: \_\_\_\_\_

WO: \_\_\_\_\_

1. \_\_\_\_\_

Service Order:

Corrective Maintenance:

#### Service Order Work Performed:

Manufacturer:

Model: \_\_\_\_\_

Serial: \_\_\_\_\_

**Description:**

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## Repairs

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To be signed by the Contractor:

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Print Name: \_\_\_\_\_

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Date:

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Signature:

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the work listed:

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Print Name/Rank:

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Date:

michael Moseman