

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

FACID/Building: NY0058 Date of Visit: 8/22/19

Contractor Personnel on Site:

1. Michael Sarro 2. _____

Work Performed: Investigated below CSS tickets.

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

1. WO# Unknown

Service Calls – Service Call Number and Description

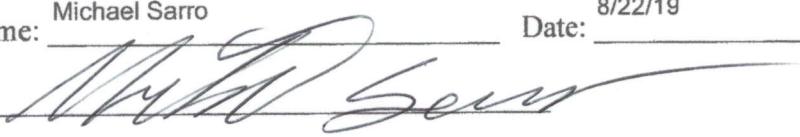
1. CSS# 20897 - REPAIR LIGHTING OCCUPANCY SENSOR RM. -Complete
2. CSS# _____
3. CSS# _____

Pictures are required (Before and After)

CERTIFICATION OF WORK

To be signed by the Contractor:

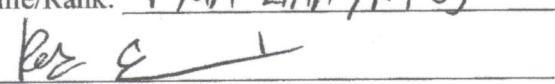
Print Name: Michael Sarro Date: 8/22/19

Signed: 

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 stated work listed:

Print Name/Rank: Ryan Linn /RFOS Date: 8/27/19

Signed: 

E-Mail: _____