

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

FACID/Building: NY023 Bldg 200 Date of Visit: 9/8/2015

Contractor Personnel on Site:

1. Tutor

2. *Tetra Chrysanthemum*

P AND J SWEET

### Work Performed:

CSL #18263

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)  
Service Orders -

Asset #	Qty	Asset Description
		PLUG 200 ROOM 2010P
		REPAIR TOILET & FISHMONGER
		REPLACE SOME PINGAP & SPAGY VALVE
		TEST FOR LEAKS

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jefferson Date: 8/8/09  
Signed: jeff

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: Louis CORBO Date: 8/8/16

Signed: Louis

E-Mail: Louis-A.CORBO+CTR@mail.mil



