

CERTIFICATION OF WORK

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

FACID/Building: NY 23 Bldg 200

Date of Visit: 8/18/22

Location Address: FT TOTTEN NY

Contractor Personnel on Site:

SHADIA, JAMES, STEVEN

Work Performed: REPLACE DEFECTIVE SEWER PUMP

Service Calls - PO/CSS#

CSS 1872 WD 14692

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JOHN WORTLE

Date: 8/19/22

Signed: [Signature]

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site.

Print Name/Rank: LOUIS CRANFORD RFO S Date: 19 AUGUST 2022

Signed: [Signature]

Email: LOUIS - CRANFORD.CIV@ARMY.MIL



