

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

FACID/Building: N1023 B206 Date of Visit: 8/13 - 8/19

Contractor Personnel on Site:

1. DENNIS TASSE

2. _____

Work Performed:

W# 2-9759

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

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Teffn Wallace Date: 8/20/20
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: Louis Corbo Date: _____

Signed: Louis Corbo

E-Mail: Louis.A.Corbo-CTR@mail.mil



