

CERTIFICATION OF WORK

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

FACID/Building: NYB23 Bldg 2d Date of Visit: 10/25/19

Contractor Personnel on Site:

1. DM VESSEL

2. *Ar*

Work Performed:

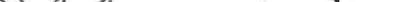
Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders - *100-17*

CSST 20425 WO# 5864

CERTIFICATION OF WORK

To be signed by the Contractor.

Print Name: John Wayne Date: 10/15/18

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 Corrso AFOS Date: 10/25/19
Signed: Louis Corrso
E-Mail: Louis.A.Corrso.cdr@msn.com

