

# CERTIFICATION OF WORK

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

FACID/Building: NY023 Bldg 1R Date of Visit: 1/10/20

Contractor Personnel on Site:

1. PAUL BENTMAN 2. PETER O'TOOLE

## Work Performed:

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)  
Service Orders - CSS # 22913 WO # 6496

Asset #	Qty	Asset Description
		REPLACED CONTROLS
		RESET SAFETY SWITCHES
		AND ALL CONTROLS
		RESET & ADJUST DAMPEN
		CHECK ENTIRE BUILDING
		& SYSTEM
		ALL WORKING

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JOHN WOTINE Date: 1/10/20

Signed: [Signature]

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: JAN 10, 20

Signed: [Signature]

E-Mail: LOUIS - A. CORBO - CTR @ MAIL - MIL





