

CERTIFICATION OF WORK

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

FACID/Building: 121 OMS, NY023 Date of Visit: 2/28/20

Contractor Personnel on Site:

1. James Johnson 2. Lament Scott
Pascal Cazales, Jon Sommo

Work Performed:

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

Asset #	Qty	Asset Description
4011	1	Pump out OWS
		Refill OWS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jon Sommo Date: 2-28-20

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 AFSS Date: 2/28/20

Signed: 

E-Mail: Louis.A.CORBO.CTR@MIL.MIL





