

CERTIFICATION OF WORK

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

FACID/Building: NY023 Date of Visit: 3/5/2021

Location Address: _____

Contractor Personnel on Site:

City Gate/ Vincent Greco

Work Performed: Replace B200 loading dock overhead roll up door

Service Calls – PO/CSS# 24434

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Vincent Greco Date: 03/4/2021

Signed: _____

To be signed by Facility Manager:

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

Print Name/Rank: Louis Corbo AFOS Date: 3/8/21

Signed: Louis Corbo

Email: louis.a.corbo.ctr@mail.mil

