

CERTIFICATION OF WORK

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

FACID/Building: NY023_CSS 24595 **Date of Visit:** 03-23-2020

Contractor Personnel on Site:

1. Fredi Marteniz 2. _____

Work Performed: Secure brush on top, secure hanging loose cover, repair damaged bottom rail, install on one side weather seal rubber on track, set limit switch and general maintenance

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Michele Dubois behalf of Fredi Martinez Date: 03-23-2020

Signed: *Michele Dubois*

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: _____ Date: _____

Signed: _____

E-Mail: _____