

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

FACID/Building: NY02 / 0003 200 Date of Visit: 3/23/20

Contractor Personnel on Site:

1. PAUL KENDAL

2. F224

JOHANE SMITH

Work Performed:

CSS 24602

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

Asset #	Qty	Asset Description
		<u>EMERGENCY REPAIR</u>
		<u>REMOVE FRONT DOOR</u>
		<u>REINFORCE FRAME ALONG</u>
		<u>REINFORCE HANSEL</u>
		<u>REINFORCE PLATE</u>
		<u>3men 3Hours each</u>

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: J. WYATT

Date: 3/23/20

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: Lewis Corbo AFOS Date: 3/23/20

Signed: 

E-Mail: Lewis-A-Corbo-CTR@Mail-MI1



