

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

FACID/Building: NY23 FRONT 641C

Date of Visit: 10/23

Contractor Personnel on Site:

1. FRTV

2. PAUL KAWACH

Work Performed:

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

[illegible]

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: John Wolfe

Date: 10/25/20

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 Date: 23 OCT 2020

Signed: 

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





