

CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)
Building: NY 12 010

Contractor Personnel on Site:

2. SMETA

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

655 27702 60 11687

CERTIFICATION OF WORK

Print Name: Taliah W. H. H.

Date: 1-6-20

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: _____

Signed: [Signature]

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

