

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

FACID/Building: NY 23 BLD 206

Date of Visit: 4/17/21

Contractor Personnel on Site:

1. Dry

2. Reception

Work Performed: Prepare Report no Post 206
Preventive Maintenance

Preventive Maintenance - (Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders - **CS 29205** **WP 100**

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: John Anderson

Date: 4/1/20

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: _____

Signed: Louis Corbo

E-Mail: Louis.A.Corbo-CTR@mail.mil

