

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID Building: <u>PHS Bldg 200</u>	Date of Visit: <u>4/2/14</u>
Location Address: <u>PT STICK, NY</u>	
Contractor Personnel on Site: <u>OUTSIDE</u>	
Work Performed: <u>THATEN 1ST FLOOR OF BUILDING FOR APP</u>	
Service Calls - POCSB <u>655.33187</u> <u>NO A/S</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>JOHN W. HINE</u>	Date: <u>2/2/14</u>
Signed: <u>[Signature]</u>	
To be signed by Facility Manager:	
I certify that the above named individuals representing the Contractor arrived on site.	
Print Name/Rank: <u>LOUIS GORDO</u>	Date: <u>2/2/14</u>
Signed: <u>[Signature]</u>	
Email: <u>LOUIS.A.GORDO@PTA.MIL</u>	

