

CERTIFICATION OF WORK	
[To be completed by the Contractor and saved in the Contractor's CMMS]	
FACID/Building: <u>W129 BLD 206</u>	Date of Visit: <u>5/18/20</u>
Location Address: <u>ST TOTH ST NY</u>	
Contractor Personnel on Site: <u>1810, JAMES PATRICK</u>	
Work Performed: Remove Trees Replace Fence	
Service Calls – PO/CSS# <u>CCT 7460 NO 16847</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: _____	Date: _____
Signed: _____	_____
To be signed by Facility Manager: I certify that the above named individuals representing the Contractor arrived on site.	
Print Name/Rank: <u>Louis Camino PGS</u>	Date: _____
Signed: <u>Louis Camino</u>	_____
Email: <u>Louis.A.Camino.CIV@CityOfNewYork.gov</u>	

