

CERTIFICATION OF WORK

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

FACID: NY023

Building: B200

1. Arian,  
Contractor Personnel on site:

2. ALFRED  
Contractor Personnel on site:

Date of Visit: 05/13/2022

Work Order Date: 05/12/2022

CSS: 455

WO: \_\_\_\_\_

Service Order: ☐

Corrective Maintenance: ☐

Service Order Work Performed:

Unit: \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Model: \_\_\_\_\_

Serial: \_\_\_\_\_

Description:

REPAIR ROOF LEAK OVER STAIR CASE

LOUIS A CORBO:917.405.7165

Repairs

Repair rubber roof around drain and east wall.

Provide and lay down gravel to stop rubber vaving

To be signed by the Contractor:

ARIAN KODRA,  
Print Name:

Arian Kodra  
Signature:

05.16.2022  
Date:

Arian Kodra Digitally signed by Arian Kodra  
Date: 2022.05.16 17:38:42  
-04'00'  
Digital Signature:

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 work listed:

LOUIS A. CORBO  
Print Name/Rank:

05.16.2022  
Date:

\_\_\_\_\_  
Digital Signature:

\_\_\_\_\_  
Signature:

