

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

FACID/Building: NY23 Bldg 128 Date of Visit: 11/8/22
Location Address: PT TOTEN NY

Contractor Personnel on Site:
Frank PWL

Work Performed: ReHab Dpnt Room Replace Hinges
Service Calls - PO/CSS#
65590628 WO 1970

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JOHN WOHME Date: 11/8/22
Signed: [Signature]

To be signed by Facility Manager:
I certify that the above named individuals representing the Contractor arrived on site.

Print Name/Rank: Lewis Grosso RFS Date: November 8 2022
Signed: [Signature]
Email: Lewis.Grosso.CIV@MILITARY.MIL

