

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

FACID: NY023

Date of Visit: 04/11/2023

Work Order Date: 11/28/2022

Building: AMSA

CSS: 90942

WO: 20199

1. DORJAN
Contractor Personnel on site:

Service Order:

2. XHULIANO

Corrective Maintenance:

Contractor Personnel on site:

Service Order Work Performed:

Unit: _____

Manufacturer: _____

Model: _____

Serial: _____

Description:

Building AMSA12 replace air hoses

Repairs

Replace 2 retractable hose systems, 3/8 inch. •
Service all new air systems, check all connections, replace threading tape. •
Test all new air systems.

To be signed by the Contractor:

ARIAN KODRA

Print Name:

04.12.2023

Date:

Arian Kodra

Digitally signed by Arian Kodra
Date: 2023.04.10 21:00:19
-04'00'

Digital Signature:

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:

Peter Comito AFOS

Print Name/Rank:

04/12/23

Date:

Peter Comito

Digital Signature:

Signature:

