

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>1799 MCP Main Gate</u>	Date of Visit: <u>8/2/27</u>
Location Address: <u>PC Fort Lewis, WA</u>	
Contractor Personnel on Site: <u>None, Remote</u>	
Work Performed: <u>Renew gate installation, repair, replace, lower</u> <u>gates</u>	
Service Calls - POCSOF <u>08082206 00 21451</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>John Wohrm</u>	Date: <u>8/2/28</u>
Signed: <u>John Wohrm</u>	
To be signed by Facility Manager: I certify that the above named individuals representing the Contractor arrived on site.	
Print Name/Rank: <u>PETER LAMITTA AFCS</u>	Date: <u>MARCH 23, 2018</u>
Signed: <u>Peter L. Lamitta</u>	
Email: <u>PETER.L.LAMITTA.CT@ARMY.MIL</u>	

