

CERTIFICATION OF WORK

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

FACID/Building:

NY23 Bldg 121

Date of Visit:

3/7/23

Location Address:

FT Totten NY

Contractor Personnel on Site:

Stephan, JAMA

Work Performed:

REPAIR STEAM PIPE (Hole)

Replaces 1265

Service Calls – PO/CSS#

01192248 W-21857

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name:

Peter Comito

Date:

3/7/23

Signed:

[Signature]

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site.

Print Name/Rank:

PETER COMITO AFAS

Date:

MARCH 3, 2023

Signed:

[Signature]

Email:

PETER.D.COMITO.CTROAFRSY.MIL



