



CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>AP12 Bldg 3000 0920</u>	Date of Visit: <u>7/10/17</u>
Location Address: <u>PERFECTOR H</u>	
Contractor Personnel on Site: <u>JOHN & STEVEN</u>	
Work Performed: <u>PAVING ADDITION, REMOVE STEAM VALVE</u>	
Service Calls - PO/CSS# <u>611 9277 WO 21817</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>JOHN WALTON</u>	Date: <u>8/10/17</u>
Signed: <u>[Signature]</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 COMITO SFC</u>	Date: <u>MARCH 10th 2017</u>
Signed: <u>[Signature]</u>	
Email: <u>PETER.D.COMITO.CTE@ARMY.MIL</u>	