

# CERTIFICATION OF WORK

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

FACID/Building: NY 23 DLOY 124

Date of Visit: 3/16/23

Location Address: FT TOTTEN NY

Contractor Personnel on Site:

JOSE, PAUL

Work Performed: Remove 2nd TOLIFD CLEAN PUMP LINE, REPAIR ONE FLUSH MONITOR

Service Calls - PO/CSS#

CSS 92367 WO 2468

Please take pictures and send with quote

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: TOLAN WOITAGE

Date: 3/16/23

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 DFAS Date: MARCH, 16, 2023

Signed: [Signature]

Email: PETER.D.COMITO.CTR@ARMY.MIL







