

CERTIFICATION OF WORK

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

FACID/Building:

NY23 BLDG 123 AMSP
1400 W 44th ST
FT TOTTEN NY

Date of Visit:

5/23/23

Location Address:

Contractor Personnel on Site:

JEM, ANTHONY

Work Performed: INSPECT 014 TRANE HVAC UNIT

Service Calls - PO/CSS#

ISS 93609 WD 2270

Please take pictures and send with quote

CERTIFICATION OF WORK

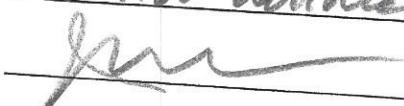
To be signed by the Contractor:

Print Name: JOHN WORRELL

Date:

5/23/23

Signed:



To be signed by Facility Manager:

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

Print Name/Rank: PETER COMITO AFOS

Date:

23 MAY 2023

Signed:



Email:

PETER.D.COMITO.CTR@DODRAY.MIL



