

CERTIFICATION OF WORK

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

FACID/Building: NY023 Date of Visit: 09/25/20

Contractor Personnel on Site: 1. Arif 2. Dori, 2amo

Work Performed: X10:10265

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders -

CERTIFICATION OF WORK

To be signed by the Contractor:

PrintName: Arian Kodra Signed: ArianKodra Date: 09/25/20

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

PrintName/Rank: Louis Coasso AFOS Date: 9/25/20

Signed:  E-Mail: Louis.A.Conso.CTR@ma.1.m.1

