

**CERTIFICATION OF WORK**  
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: Ny 058 Date of Visit: 12-10-19

Contractor Personnel on Site:

1. Ian Kandl 2. \_\_\_\_\_

**Work Performed:**

**Service Call:**

1. WO# 573

**Service Calls – Service Call Number and Description**

1. CSS# 216 79  
2. CSS# \_\_\_\_\_  
3. CSS# \_\_\_\_\_

Please take pictures

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Shane Date: 12-11-19  
Signed: Shane 

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:

Print Name/Rank: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

E-Mail: \_\_\_\_\_

