

CERTIFICATION OF WORK

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

FACID/Building: NY058 - 114

Date of Visit: 12/28/22

Location Address: Shoreham, Long Island

Contractor Personnel on Site:

DEEN ROWE

Work Performed: g Screwed back thermostat on wall in bathroom  
men's 1st floor.

Service Calls – PO/CSS#

91327

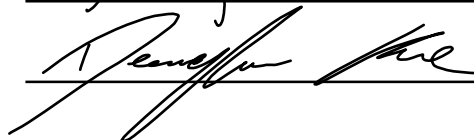
Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Deen Vaughn Rowe

Date: 12/28/22

Signed: 

To be signed by Facility Manager:

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

Print Name/Rank: P COM 170

Date: 12-28-22

Signed: 

Email: PETER.J.COMITO@GIZ.BARMY.MIL



AR 420-1 mandates the  
following thermostat settings:  
Heating = 68°F & Cooling = 76°F