

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

Date of Visit: 9/2

1. SWANIE 2. MIKE BOWEN

PM

[illegible]

Print Name: John Wallace Date: 2/27

Signed: 

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: ROBERT BENNET

Date: 9/15/16

Signed: [Signature]

E-Mail: _____