

## CERTIFICATION OF WORK

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

FACID/Building: **Saugerties 128** Date of Visit: **11/23/2020**

#### Contractor Personnel on Site:

1. Mike Burdick 2.

## Work Performed:

## Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

## Quarterly and semi annual preventative maintenance

1. **Refrigerator, freezer, ice machine, water heaters, exit lights, compressor**

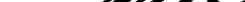
## Service Calls – Service Call Number and Description

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

## **CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Mike Burdick Date: 11/23/2020

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Michael Moseman Date: 11/26/2020

Signed: michael Moseman

E-Mail: michael.moseman.ctr@mail.mil