

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

FACID/Building: PA209 Date of Visit: 12-22-2022

Contractor Personnel on Site:

1. Pat Boardman 2. _____

Work Performed:

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

1. 4026 4927- 4978-4979- 5006 5165- 5166 5200 5201 5202

Service Calls - Service Call Number and Description

1. CSS# _____
2. CSS# _____
3. CSS# _____

I Inspected + Cleared

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Pat Boardman Date: _____

Signed: Pat J. Boardman

To be signed by Facility Manager:

By signing the Certification of Work, 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. This is NOT a Certification that the Work was performed correctly - The COW simply verifies that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: St. TT w/ kots wife Date: 12/22/22

Signed: chad

E-Mail: scott.w.kotowski@keweenaw.k12.mi.us