

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

FACID/Building: MO02.1

Date of Visit: 10-24-18

Contractor Personnel on Site:

1. Jim Moltz
2. Pat Donovan
3. _____

4. _____
5. _____
6. _____

WFO 5902-03-04X-05

Service Calls – Service Call Number and Description

1. inspected boilers 1, 2, 3. and 4
2. _____
3. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: James Moltz Date: 10-24-18

Signed: J. Moltz

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: Ms. Ciatron, Jennifer Date: 10-24-18

Signed: J. Moltz

E-Mail: jennifer.m.ciatron.mil1@mail.mil