

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

FACID/Building: VA009 Date of Visit: 11/5/18  
Contractor Personnel on Site:

1. Jacob Long 2. \_\_\_\_\_

**Work Performed:** Installed (2) temperature and pressure relief valves for boilers to pass inspection.

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

1. WO# 5909/5910

**Service Calls – Service Call Number and Description**

1. CSS# 5909

2. CSS# 5910

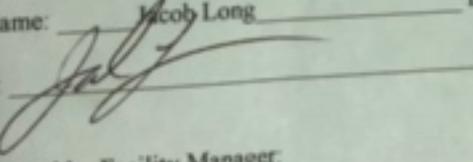
3. CSS# \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

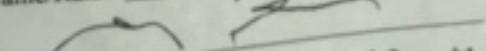
Print Name: Jacob Long Date: 11/5/18

Signed: 

To be signed by Facility Manager:

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: ST. Myer SFC Date: 11/5/18

Signed: 

E-Mail: glen.p.stayer.mil@mail.mil