

CERTIFICATION OF WORK

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

FACID/Building: VA012 Date of Visit: 1/30/2019
Contractor Personnel on Site:

1. Sean O'Neill 2. _____

Work Performed:

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

1. WO# COM0097946

Service Calls - Service Call Number and Description

1. CSS#	<u>CSS#</u>	<u>Hydronic system (No CSS#)</u>
2. CSS#	<u>16433</u>	_____
3. CSS#	<u>164</u>	_____

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To be signed by the Contractor:

Print Name: Sean O'Neill Date: 1/30/2019

Signed: S-O'Neill

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: Joseph Gebrey/GS-9 Date: 02/01/20

Signed: Joseph Gebrey

E-Mail: joseph.e.gebrey.civ@mil.mil