

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

FACID/Building: 14048 Date of Visit: 8/9/2019
Contractor Personnel on Site:

1. Jeremy Gray 2. _____

Work Performed:

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

1. WO# _____

Service Calls - Service Call Number and Description

1. CSS# 70638

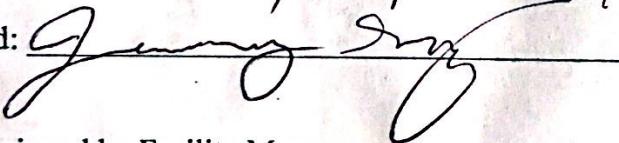
2. CSS# 182412

3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jeremy Gray Date: 8/9/2019

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: Scott Grenier RFOS Date: 22 Aug 19

Signed: 

E-Mail: Scott.e.grenier.cdv@mail.mil