

CERTIFICATION OF WORK

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

FACID/Building: VA049 Date of Visit: 10/23/19  
Contractor Personnel on Site:

1. Jeremy Gray 2. Michael Watts

**Work Performed:**

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

1. WO# COM0118292, COM0119817, COM118661

**Service Calls** - Service Call Number and Description

1. CSS# 14320 mini split install  
2. CSS# 20816 Ductwork Modification  
3. CSS# 15401

---

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jeremy Gray Date: 10/28/2019

Signed: Jeremy Gray

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: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

E-Mail: \_\_\_\_\_