

## CERTIFICATION OF WORK

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

FACID/Building: VA 50Date of Visit: 5/15/19

Contractor Personnel on Site:

1. Sean Watson

2. \_\_\_\_\_

## Work Performed:

**Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)**1. WO# 8532

## Service Calls – Service Call Number and Description

1. CSS# Asset # 2347 2348

2. CSS# \_\_\_\_\_

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

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Sean Watson Date: 5-15 2019  
Signed: Sean Watson

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: Angela W. Williams CTR Date: 15 May 2019Signed: Angela W. WilliamsE-Mail: Angela.W.Williams.CTR@MAIL.MIL

