

**CERTIFICATION OF WORK**

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

FACID/Building: \_\_\_\_\_ Date of Visit: 1-23-19

Contractor Personnel on Site:

1. ISG 2. \_\_\_\_\_

**Work Performed:**

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

1. WO# \_\_\_\_\_

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

1. CSS# 17190 Install Ceiling Tiles  
2. CSS# \_\_\_\_\_  
3. CSS# \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Andy Bird Date: 1-23-19

Signed: Andy Bird

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: Callinsore, Thelma Date: \_\_\_\_\_

Signed: Thelma Callinsore

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



