

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

FACID/Building: WV006 Date of Visit: 2-10-202

Contractor Personnel on Site:

1. Brian Mcderment 2. _____

Work Performed:

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

1. _____ February Pm _____

Service Calls – Service Call Number and Description

1. WO 17686 3002,3003,3004,3005,3202,3203,3204, _____
2. WO 17728 9138 WO 17810 6833 WO 17834 6888,6902 _____
3. WO 17873 7012,7061 WO 17710 3200,3201,3373,4689, _____
4690 WO 17787 G054 WO 17860 6975 WO 17788 G055 _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Mcderment Date: 2-10-2025

Signed: Brian Mcderment _____

To be signed by Facility Manager:

By signing the Certification of Work, 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.
This is NOT a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: _____ Date: 2-10-2025

Signed: Don _____

E-Mail: _____

