

CERTIFICATION OF WORK

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

FACID/Building: WV006 Date of Visit: 5-30-2025

Contractor Personnel on Site:

1. Brian Mcderment 2. _____

Work Performed:

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

- Repaired drain in the mens 1st floor rest room, replaced toilet seat, replaced ceramic soap dishes in the mens and woman's 1st floor rest rooms.

Service Calls – Service Call Number and Description

- | | | |
|---------|---------------------|-----------------|
| 1. CSS# | <u>FEMS 2966340</u> | <u>WO-18015</u> |
| 2. CSS# | _____ | _____ |
| 3. CSS# | _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Mcderment Date: 5-30-2025

Signed: 

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: 5-30-2025

Signed: 

E-Mail: _____

