

### CERTIFICATION OF WORK

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

FACID/Building: Clarksburg AMSA Date of Visit: 11/9/18

Contractor Personnel on Site:

1. Mark Myers
2. \_\_\_\_\_

#### Work Performed:

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

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

#### Service Calls - Service Call Number and Description

1. CSS# 15201 - Bay 8 Garage Door Opener
2. CSS# \_\_\_\_\_
3. CSS# \_\_\_\_\_

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### CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

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: Timothy Ferguson HC-10 Date: 11/9/18

Signed: [Signature]

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