

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

FACID/Building: WV014

Date of Visit: 11/20/18

Contractor Personnel on Site:

1. Steve Tregear

2. _____

Work Performed:

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

1. WO# 152673

Service Calls – Service Call Number and Description

1. CSS# 15009

2. CSS# _____

3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Steve Tregear Date: 11/20/18

Signed: ST

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: Bruce H. Hotfield Date: 11/20/18

Signed: BH Hotfield

E-Mail: bruce.h.hotfield.mil@mail.mil