

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

FACID/Building: Kingwood Date of Visit: 2/15/19

Contractor Personnel on Site:

1. 1614 Eta - 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# 1 Col 04 - Outdoor Ramps
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ronald P. Nichols Date: 3-22-19

Signed: Ronald P. Nichols

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: Jennifer A. Baile Date: 2-15-19

Signed: Jennifer A. Baile

E-Mail: Jennifer.A.Baile.Ctr@mail.mil