

CERTIFICATION OF WORK

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

FACID/Building: USARC - Morgantown Date of Visit: 8/13/18
WV029

Contractor Personnel on Site:

1. Ronnie Nichols 2. Jarod Graffius

Work Performed:

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

1. WO# _____

Service Calls - Service Call Number and Description

1. CSS# 14846 - 2 eye wash station
2. CSS# 14850 - 1 Pole Light Not working
3. CSS# 14920 - Repair barb wire on fence

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: Davis Sigs R SPC Date: 13/08/18

Signed: SSR

E-Mail: Sigs.R.Davis2.mil@mail.mil