

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

FACID/Building: WV029 Morgantown Date of Visit: 12/18/18

Contractor Personnel on Site:

1. Kevin Snyder 2. George Coffman

Work Performed:

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

1. WO# _____

Service Calls - Service Call Number and Description

1. CSS# 16410 - plumbing issues

2. CSS# _____

3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Kevin Snyder Date: 12/18/18

Signed: Kevin Snyder

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 Baile Date: 12-18-18

Signed: J Baile

E-Mail: jennifer.a.baile.cfr@gmail.com