

**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: Jennifer Baile  
E-Mail: jennifer.a.baile.cfr@mail.mil