

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

FACID/Building: WV 043

Date of Visit: 9/24/19

Contractor Personnel on Site:

1. Tony Lazzus
2. Jim Geertgens
3. _____

4. _____
5. _____
6. _____

Work Performed:

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

1. 10924
2. 10874
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

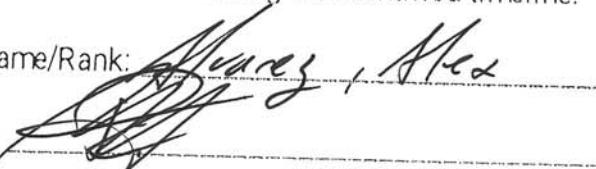
Print Name: Jim Geertgens Date: 9-24-19

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Henry, Alex Date: 09 24 19

Signed: 

E-Mail: