

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

FACID/Building: ny024 Date of Visit: 8-26-2022

Contractor Personnel on Site:

1. \_\_\_\_\_ 2. \_\_\_\_\_

**Work Performed:**

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

1. \_\_\_\_\_

**Service Calls** – Service Call Number and Description

1. CSS#\_\_\_\_\_
2. CSS#\_\_\_\_\_
3. CSS#\_\_\_\_\_

---

**CERTIFICATION OF WORK**

To be signed by the Contractor:

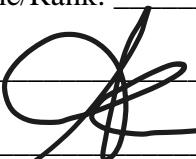
Print Name: Ramon V Date: 8-26-2022

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: Anthony Jackson Date: 8-26-2022

Signed: 

E-Mail: gjackson@nyc.gov

