

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

FACID/Building: ny116-02 Date of Visit: 6-10-2022

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed:

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

1. replace battery Amsa bldg ny116-02

Service Calls – Service Call Number and Description

1. CSS# css#810
2. CSS# work order #17651
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ramon V Date: 6-10-2022

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 henry Date: 6-10-2022

Signed: 

E-Mail: 

EMERGENCY LIGHT

