

CERTIFICATION OF WORK

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

FACID/Building: PA 080-02 Date of Visit: 2-8-18

Contractor Personnel on Site:

1. FRANCIS SAPIENZA 2. _____

Work Performed:

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

1. WO# 2565, 2328, 2405 - Backflow

Service Calls – Service Call Number and Description

1. CSS# _____
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: FRANCIS SAPIENZA Date: 2-8-18

Signed: [Signature]

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: SGT Navarre Date: 2-13-2018

Signed: [Signature]

E-Mail: ajin it Navarre.mil @ nat.mil