

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

FACID/Building: WV024 Date of Visit: 8-19-2025

Contractor Personnel on Site:

1. Brian Mcderment 2. _____

Work Performed:

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

1. August Pm See Below

Service Calls – Service Call Number and Description

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

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Mcderment Date: 8-19-2025

Signed: 

To be signed by Facility Manager:

August 19, 2025

By signing the Certification of Work, 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.

This is NOT a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: D Trbut 6s to 9 Date: 8-19-2025

Signed: 

E-Mail: _____

WO-19561 3193,3194 WO-19588 9251,9252 WO-19705 9244
WO-19706 9245 WO-19723 G246 WO-19753 7044 WO-19553
3095,3096 WO-19755 7052