

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

FACID/Building: WV035 Date of Visit: 9-4-2025

Contractor Personnel on Site:

1. Brian Mcderment 2. _____

Work Performed:

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

1. Seoptember 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: 9-4-2025

Signed: Brian Mcderment

To be signed by Facility Manager:

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: Brian Date: 9-4-2025

Signed: _____

E-Mail: _____

WO-19824 9309,9313 WO-19886 G070 WO-19919 9303
WO-19969 9292 WO-19970 9295,9296,9297 WO-19971-9300,9302
WO-199774635,4636,4637
WO-20047 9286 WO-20048 9309 WO-20049 9312
WO-20050 9313 WO-19887 G071 WO-19991 4682
WO-19888 G072