

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: _____ Date of Visit: 7-16-21

Contractor Personnel on Site:

- | | |
|------------------------------------|----------|
| 1. <u>KEVIN WAYNE CORNETT, SR.</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 30363 WO# 14155 VA040

Description of Repairs

AHU-5 - Will need to provide 208V circuit to fan motor as no power is there - now new belt and control valve will need to be installed, controls will also need to be installed
FCU 7 - Power will need to be added and a control valve

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Kevin Cornett Date: 7-16-21

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: Mark Anderson GS-12 Date: 16 July 21

Signed: _____

E-Mail: mark.s.anderson7.mil@mail.mil