CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: WV041 Date of Visit: 2-14-19

Contractor Personnel on Site:

1. Justin Zavacky
2. _____
3. _____
4. _____
5. _____
6. _____

Service Call Number

CSS# _____ WO# _____

Description of Repairs

Call for no heat in upper building. tested 3 way valve and actuator - found clogged strainer, also blew out coil and drain.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Justin Zavacky Date: 2-14-19

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: SGT Komaniak, Matthew Date: 14 Feb 2019

Signed: _____

E-Mail: _____