CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: PA027 Date of Visit: 2-6-19

Contractor Personnel on Site:

1. DAVID GOOLAW
2. JACOB SHIPTOR
3. _____
4. _____
5. _____
6. _____

Service Call Number

CSS# 18403 WO# 6452

Description of Repairs

SHUT OFF BOILERS + DRAINED 55 GALLON GLYCOL INTO DRUM. CUT OUT 3/4" ELBOW THAT WAS LEAKING, REPLACED 3/4 VALVE, 90° ELBOW, 2- 45° ELBOWS. REFILLED SYSTEM OF LEAKS. MADE SURE ALL PUMP + BOILER BACK ON.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: DAVID GOOLAW Date: 2-6-19

Signed: David Goolaw

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: SHADOWENS GARY Date: 06 FEB 19

Signed: _____

E-Mail: _____


OFF


OFF
NIBCO
AHEAD OF THE FLOW
Metabo