

CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: WV007 Date of Visit: 9-13-23

Contractor Personnel on Site:

- | | |
|-------------------|----------|
| 1. <u>Brandon</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 93892 WO# 13382

Description of Repairs

Was shown where the water
was leaking. Removed insulation
from cold water line. The 90 is
leaking will need to be replaced.
Will quote repairs

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brandon Fulley Date: 9-13-23

Signed: Brandon Fulley

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: JEFF HARRIS (GS-09) Date: 20230913

Signed: Jeff Harris

E-Mail: _____