

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: WV009 Date of Visit: 12/11/23

Contractor Personnel on Site:

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

Service Call Number

CSS# ~~85320~~ 85230 WO# 11814

Description of Repairs

Remove existing shower walls and plumbing.

b.) Install new fiberglass shower insert with new faucet controls and shower head.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Karlee Demain Date: 12/19/23

Signed: Karlee Demain

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: Jennifer A Bailie Date: 12/21/23

Signed: Jennifer A Bailie

E-Mail: jennifer.a.bailie.ctr@army.mil