

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: 006 Date of Visit: 11-28-23

Contractor Personnel on Site:

1. Brandon 4. _____
2. _____ 5. _____
3. _____ 6. _____

Service Call Number

CSS# _____ WO# 202552

Description of Repairs

Performed a building wall through to check on the hot water coils in the offices.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brandon Fulls Date: 11-28-23

Signed: Brandon Fulls

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: Thomas McBurrey Date: 11/28/23

Signed: T. McBurrey

E-Mail: _____