

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: _____ Date of Visit: 04-08-25

Contractor Personnel on Site:

1. <u>Christopher Wooten</u>	4. _____
2. _____	5. _____
3. _____	6. _____

Service Call Number

CSS# _____ WO# 215522

Description of Repairs

Replaced combustion Blower in boiler 1

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Christopher Wooten Date: 04-08-25

Signed: Chris Wooten

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 Mcburney Date: 20250414

Signed: T

E-Mail: _____