

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY070 BLDG2 Date of Visit: 3/12/25

Contractor Personnel on Site:

1. <u>Patrick Brown</u>	4. _____
2. _____	5. _____
3. _____	6. _____

Service Call Number

css# 99020 wo# 17633

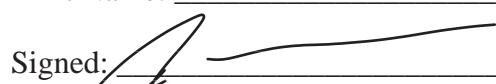
Description of Repairs

I shut down The hydraulic system and removed the pressure from the lines took the lines apart retaped and put the lines back together and then tested for proper operation and leaks

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 3/12/25

Signed: 

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 Wallner Date: 3/12/25

Signed: 

E-Mail: Jeffrey.Wallner1@gmail.com

