

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: WV007 Date of Visit: 11-13-23

Contractor Personnel on Site:

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

**Service Call Number**

CSS# \_\_\_\_\_ WO# 200630

**Description of Repairs**

Shut off the building water supply at the backflow valve, drained the cold water line. Removed bad piping and pro pressed in new copper pipe. Bled the air from the line.

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Brandon Fullis Date: 11-13-23

Signed: Brandon Fullis

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 / 6469 Date: 2023/11/3

Signed: [Signature]

E-Mail: \_\_\_\_\_