

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: _____ Date of Visit: 11/5/18

Contractor Personnel on Site:

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

Service Call Number

CSS# 16129 WO# 6406

Description of Repairs

Look at other heater that smells
Like its Buggy spoke to service
CME will take care of unit

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _____ Date: _____

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: Rick Seayre SSA Date: 20 Nov 18

Signed: [Signature]

E-Mail: _____