CERTIFICATION OF WORK

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

FACID/Building: _____ Date of Visit: 2-4-19

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed: Ran sewer machine down the drain for the dishwasher but couldn't get past the trap. Pulled out the cable and it had rust on it. The drain is corroded shut. Need to reroute the dishwasher drain to the other floor drain that is xxx to the ~~kitchen~~ dishwasher. Check the drains in the mechanical room and they are good

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. WO# 7535

Service Calls – Service Call Number and Description

1. CSS# 15130
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Bojan Martinovich Date: 2-4-19

Signed: Bil Mll

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: Mitchell Morrison, SSG Date: 2-4-19

Signed: _____

E-Mail: _____