

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY065 BLDG1 Date of Visit: 12/9/24

Contractor Personnel on Site:

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

Service Call Number

 CSS# 98859 wo# 16620

Description of Repairs

I had to shut down The water to the building , the shut off valve for the water fountain was broke and then I removed the water fountain and found the pipe behind the shut off valve was rusted out I had to replace the nipple and the valve And then replaced the drain piping ,I then installed the new water fountain and tested for proper operation and leaks

CERTIFICATION OF WORK

To be signed by the Contractor:

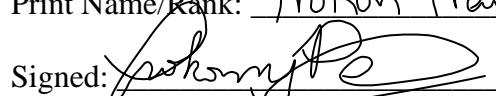
Print Name: Patrick Brown Date: 12/9/24

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: Troyony Pate Date: 12/9/24

Signed: 

E-Mail: _____

