

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY070 BLDG1&2 Date of Visit: 4/25/23

Contractor Personnel on Site:

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

Service Call Number

CSS# 92547 WO# 12371

Description of Repairs

In building two men's bathroom I replaced the spud And flush valve. In building one women's bathroom Stall One I replaced the spud and in women's bathroom stall #2 i replaced the flush valve and spud.in BLDG1 mens restroom handicap stall i replaced the flush valve and installed a oversized spud gasket in order to get the spud to catch and tested them all for leaks and proper operation

CERTIFICATION OF WORK

To be signed by the Contractor:

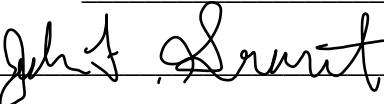
Print Name: Patrick Brown Date: 4/25/23

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: John Granata Date: 4/25/23

Signed: 

E-Mail: _____

