

**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  
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**CERTIFICATION OF WORK**

To be signed by the Contractor:

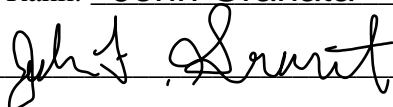
Print Name: Patrick Brown Date: 4/25/23

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: \_\_\_\_\_

