

FACILITY Building: NY 226

Date of Visit: 11 DEC 18

Contractor Personnel on Site:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 15733 WO# 5899

Description of Repairs

REFILL GLYCOL TANK (100% WATER/40% GLYCOL)
IN MECHANICAL ROOM (TESTED TO -27°F)

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: John D. [Signature] Date: 11 DEC 18

Signed: [Signature]

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 F. GRANATA Date: 11 DEC 18

Signed: [Signature]

E-Mail: JOHN.F.GRANATA.CTR@MAIL.MIL





