

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: PA118 Date of Visit: 1-10-19

Contractor Personnel on Site:

- |                     |          |
|---------------------|----------|
| 1. <u>Jim Ferne</u> | 4. _____ |
| 2. _____            | 5. _____ |
| 3. _____            | 6. _____ |

**Service Call Number**

CSS# 15811 PA118SOW WO# 5927

**Description of Repairs**

INSTALL MANUAL operated Remote Boiler Shutdown  
Switch outside the Boiler Room Door

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: JAMES A. FERNE Date: 1-10-19

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: JUSTIN ACE WS-09 Date: Jan 10 2019

Signed: [Signature]

E-Mail: \_\_\_\_\_







117

Mechanical







NATURAL GAS

NATURAL GAS

HI TEMP WATER SUP

POTABLE COLD WTR

FIRE  
EXTINGUISHER

16x20x2  
(8)

Air Filtration

16x24x2  
(4)

EMERGENCY STOP



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Mechanical

