

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: PA063 Date of Visit: Dec 11, 2018

Contractor Personnel on Site:

- |                           |          |
|---------------------------|----------|
| 1. <u>KEVIN CLINE</u>     | 4. _____ |
| 2. <u>JOAD SCHWEIKERT</u> | 5. _____ |
| 3. _____                  | 6. _____ |

Service Call Number

CSS# 16198 WO# 6412

Description of Repairs

REPLACED LEAKING, SEIZED UP  
ZONE VALVES FOR HOT WATER COIL  
ON MCQUAY UNIT IN ROOM 124

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: KEVIN CLINE Date: Dec 11, 2018

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: WILLIAM MORGAN, GS-11 Date: 12-11-18

Signed: [Signature]

E-Mail: WILLIAM.H.MORGAN.CIV@MAIL.MIL











