

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY067 Date of Visit: 1-8-19

Contractor Personnel on Site:

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

Service Call Number

CSS# 16722 WO# 2015

Description of Repairs

Repaired 3/4" 90° and 3/4" x 6" pipe, also Replaced 2-
2" Dielectric Nut unions, cut and repaired lines as
needed

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1-8-19

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: Doug Rushko AFOS Date: 01/08/19

Signed: _____

E-Mail: douglas.rushko.ctn@mail.mil

















