

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: _____ Date of Visit: _____

Contractor Personnel on Site:

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

Service Call Number

CSS# _____ WO# _____

Description of Repairs

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _____ Date: _____

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:

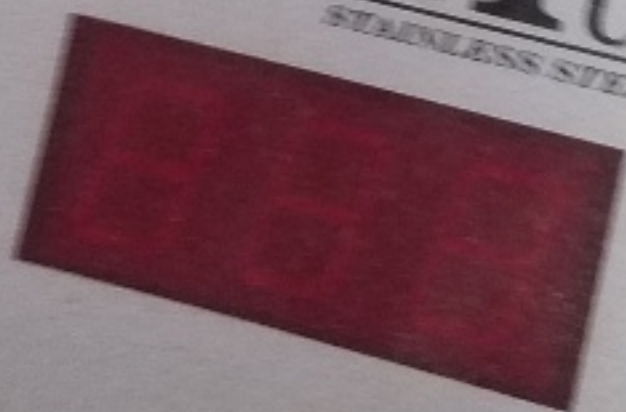
Print Name/Rank: _____ Date: _____

Signed: Cynthia Croyle _____

E-Mail: _____

Boiler-2
Boiler-1
Boiler-3

MUNCHKIN
STAINLESS STEEL HIGH EFFICIENCY BOILER



CONTROLS



US

FLAME ON

S 1 / -

S 2 / +

S 3
PROGRAM

CONTROLLER OF
AUTOMATIC GAS IGNITION
ANSI Z21.1
CANADA

