

## **CERTIFICATION OF WORK SERVICE CALL**

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

FACID/Building: DE002 Date of Visit: 1/16/19

#### Contractor Personnel on Site:

1. John Brown
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

## Service Call Number

CSS# 17131 WO# 7190

## Description of Repairs

Reattach vent on door in male latrine.

## **CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W. Brown Date: 1/16/19

Signed: Johnny W. Brown

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: GS9 Hector Castellanos Date: 1/16/19

Signed: John Doe

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

