

## CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: Ny067 Date of Visit: 5/14/19

Contractor Personnel on Site:

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

Service Call Number

CSS# 17482 WO# 3193

**Description of Repairs**

I removed old emergency eyewash and shower station and replaced with a brand new one replumbed and tested to ensure no leaks and the unit is operating properly

---

---

## CERTIFICATION OF WORK

To be signed by the Contractor:

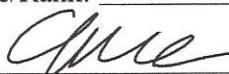
Print Name: Patrick Brown Date: 5/14/19

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: casimir szatko Date: 5/14/19

Signed: 

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



