

CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: MDC02 Date of Visit: 7/18/22

Contractor Personnel on Site:

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

Service Call Number

CSS# 1748 WO# 18683

Description of Repairs

*REPAIR LEAK IN CEILING

*SHALE SEWER IN 2ND FL RESTROOMS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: CHRIS TROTTER Date: 7/18/22

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: Luan Nguyen Date: 20220718

Signed: _____

E-Mail: Luan.L.nguyen.civ@armymil

