

## **CERTIFICATION OF WORK SERVICE CALL**

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

FACID/Building: MD002 B-1 Date of Visit: 1/4/19

#### Contractor Personnel on Site:

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

## Service Call Number

css# 17503 wo# 7546

## Description of Repairs

Remove old flush valve and install new flush valve and auto flush.

---

---

---

---

## CERTIFICATION OF WORK

To be signed by the Contractor:

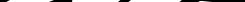
Print Name: Johnny W. Brown Date: 1/4/19

Signed: John W. Doe

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: SGT Ryan Chidress Date: 1/4/19

Signed: 

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

