

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA009

Date of Visit: 12/9/19

Contractor Personnel on Site:

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

Service Call Number

CSS# 19109

WO# 8444

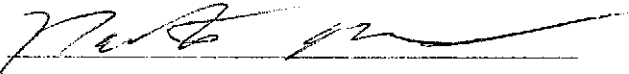
Description of Repairs

Cut asphalt, laid in new wire for outside
safety & fire exit loops. Sealed with bondo
Tested all good

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Nathan Perreault Date: 12/9/19

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: _____ Date: _____

Signed: _____

E-Mail: _____



