

STATE OF WORK
SERVICE CALL

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

FACID/Building: DE 007

Date of Visit: 6/20/19

Contractor Personnel on Site:

1. Ronald

2. Brian

3. _____

4. _____

5. _____

6. _____

Service Call Number

CSS# 19737

WO# 9582

Description of Repairs

Replace contactor. Removed old
contactor. Installed new contactor.
Complete.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ronald Monterroza

Date: 6/20/19

Signed: [Signature]

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: JASON GAVIN AFOS

Date: 6/20/19

Signed: [Signature]

E-Mail: _____





Schneider
Electric

LC1D80
~ AC

TeSys

21 NC
13 NO

14 NO
22 NC

1 L1

3 L2

5 L3

2 T1

4 T2

6 T3