

## CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: VA 006 Date of Visit: 12-9-19,

Contractor Personnel on Site:

1. Bill Davis TWI
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Service Call Number

CSS# 20297 WO# 10116

Description of Repairs

REMOVED BAD SPOT, ORDERED NEW ONE, PICKED UP NEW ONE & RETURNED. INSTALLED & ✓ OPERATION OK  
NO LEAKS

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Bill Davis Date: 12-9-19

Signed: Bill Davis

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: SFC Watson Date: 2019 12 09

Signed: SFC Watson

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

