

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY039 BLDG2 Date of Visit: 9/11/19 - 9/12/19

Contractor Personnel on Site:

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

Service Call Number

CSS# 20818 WO# 5602

Description of Repairs

I removed the cages to gain access to the sheetrock and insulation that was ruined I replaced the sheetrock and insulation i put one coat of fire taping on and patched the tar on the roof to stop the leak

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 9/12/19

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: Doug Rushlo AFOS Date: 9/12/19

Signed: 

E-Mail: _____

