

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: NY127 BLDG1 Date of Visit: 2/18/20-2/21/20,

Contractor Personnel on Site: 2/24/28-2/28/20,
3/2/20-3/6/20

1. Patrick Brown 4. _____
2. _____ 5. _____
3. _____ 6. _____

Service Call Number

CSS# 21181 WO# 5670

Description of Repairs

I removed the bad expansion tank and replaced it with a new expansion tank. I removed 14 nut unions that were leaking and replaced with 14 new nut Unions. I also replaced two control valves that were leaking. I filled the glycol tank to its proper level and it is holding its level

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 3/6/20

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: Lars luffman Date: 3/6/20

Signed: 

E-Mail: _____

