

**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,

2/24/28-2/28/20,

Contractor Personnel on Site:

3/2/20-3/6/20

- | | |
|-------------------------|----------|
| 1. <u>Patrick Brown</u> | 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 Iuffman Date: 3/6/20

Signed: _____

E-Mail: _____

