

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: VA050 Date of Visit: 10-10-19

Contractor Personnel on Site:

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

**Service Call Number**

CSS# 21414 WO# 110-13

**Description of Repairs**

REMOVE WOOD & SCREWS. DRILLED NEW HOLES THRU WOOD, STEEL & CONCRETE.

RE ATTACHED WOOD. RE ASSEMBLED DOOR HARDWARE. OPERATION (OK).

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Bill Davis Date: 10-10-19

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:

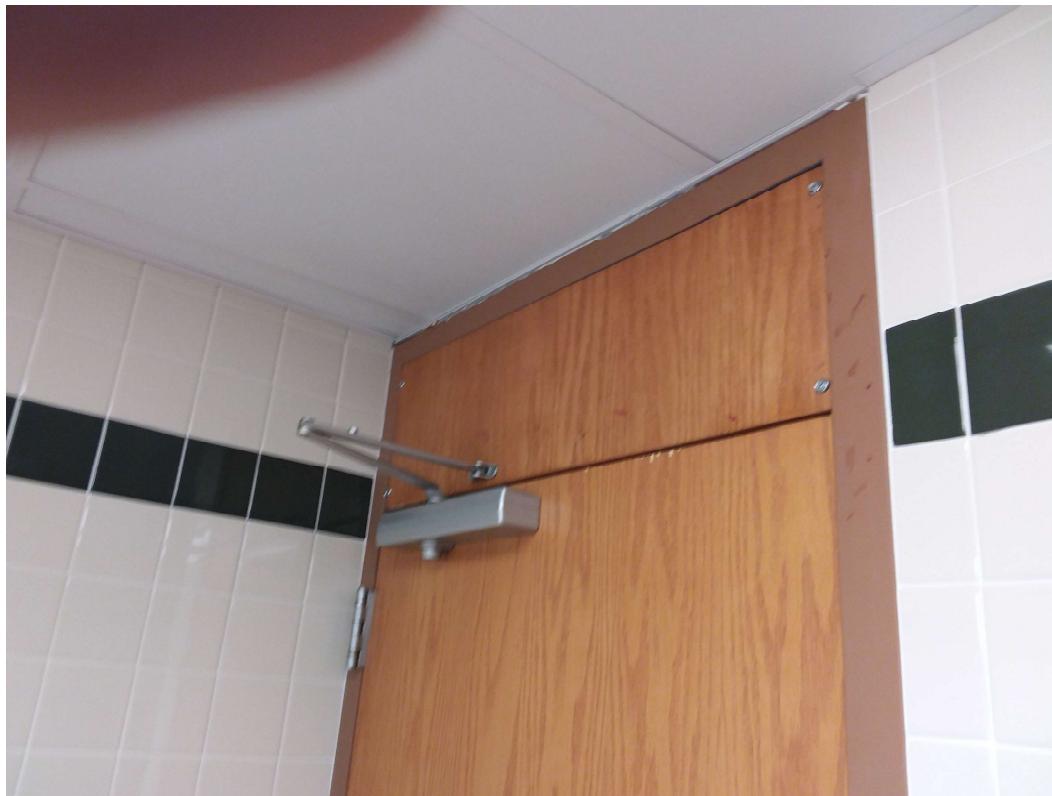
Print Name/Rank: CTR Angela W. Williams - Taylor Date: 16 OCT 19

Signed: Angela W. Williams

E-Mail: Angela.W.Williams.CTR@MAIL.MIL



Before



After