

**CERTIFICATION OF WORK
SERVICE CALL**

(To be completed by the Contractor and saved in the Contractor's CMMS)
NY127 BLDG 1&2 **7/13/20-7/14/20**

FACID/Building: _____ Date of Visit: _____

Contractor Personnel on Site:

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

Service Call Number

CSS# 21821 WO# 6034

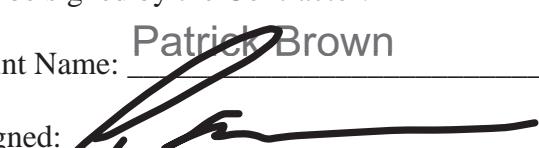
Description of Repairs

I pressure washed both buildings 1 and 2 and remove moss
and dirt from brick

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 7/14/20

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:

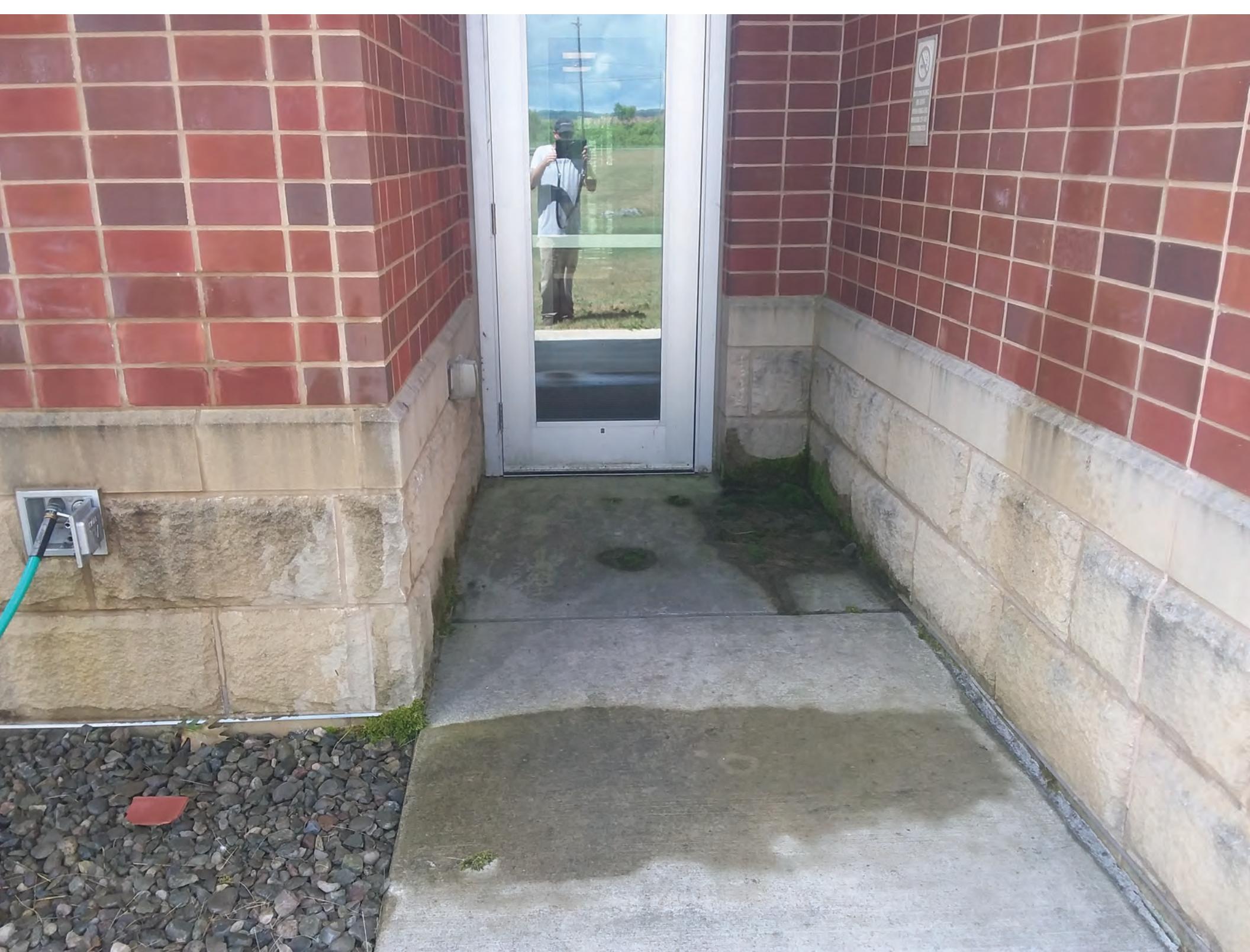
Print Name/Rank: LARS LUFFMAN Date: 7/14/20

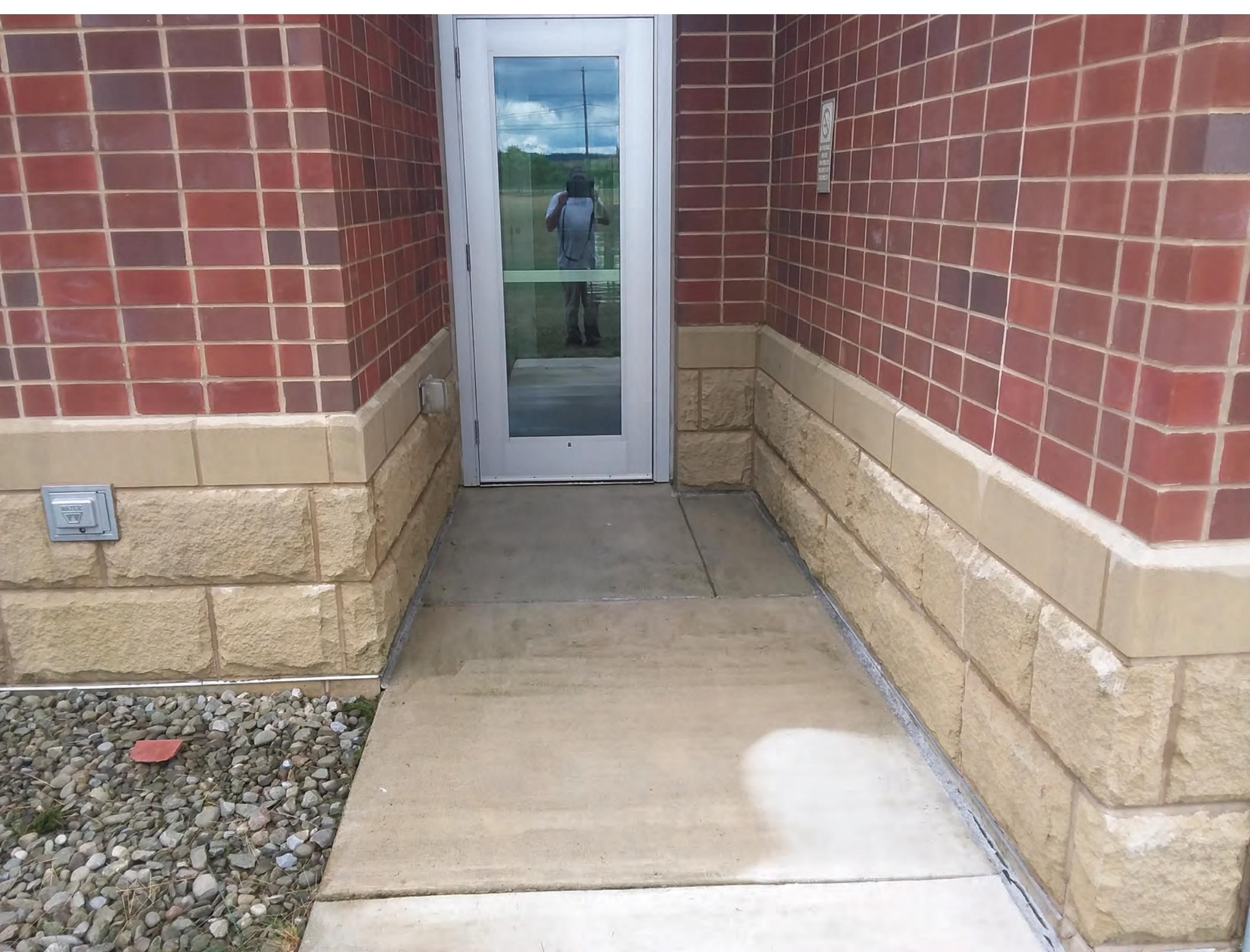
Signed: 

E-Mail: _____

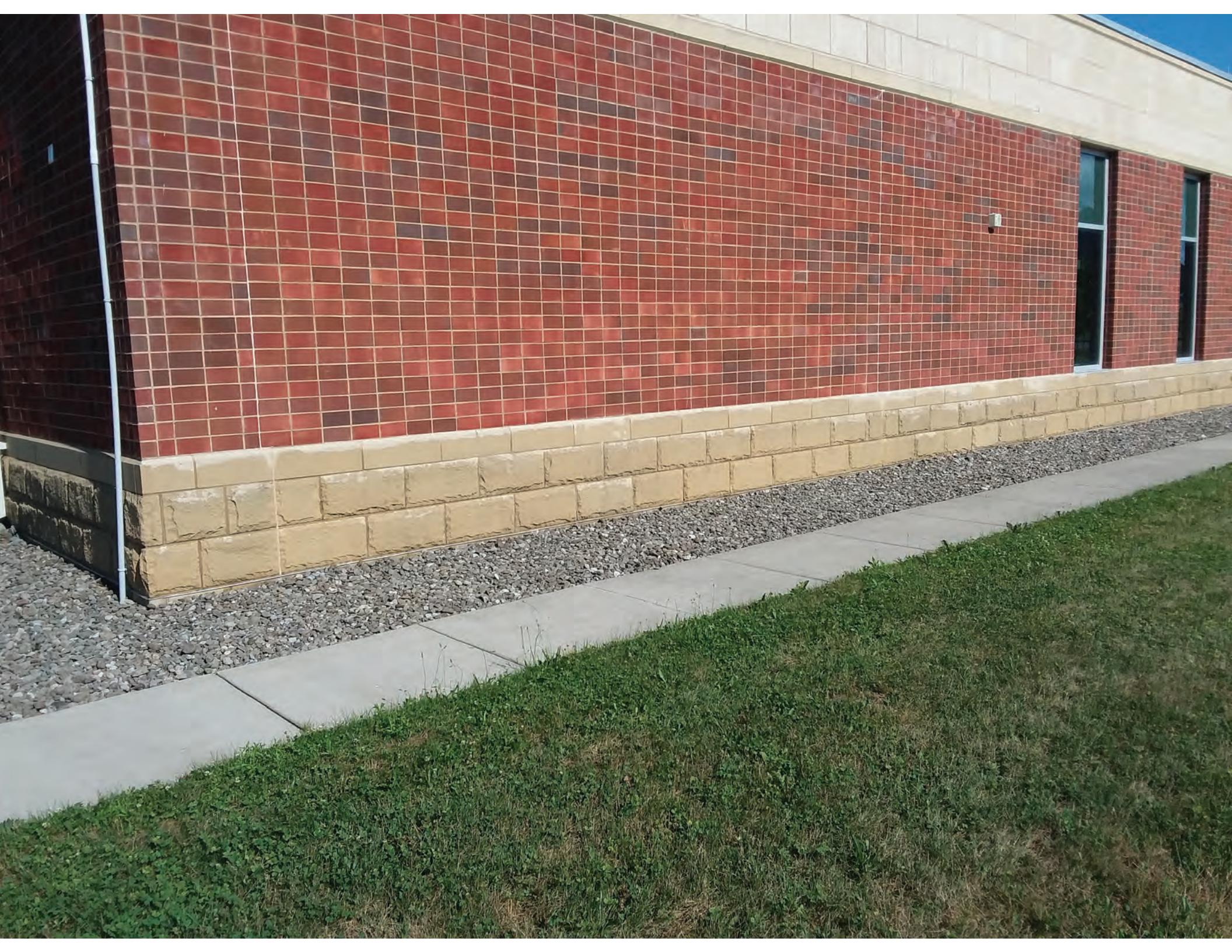




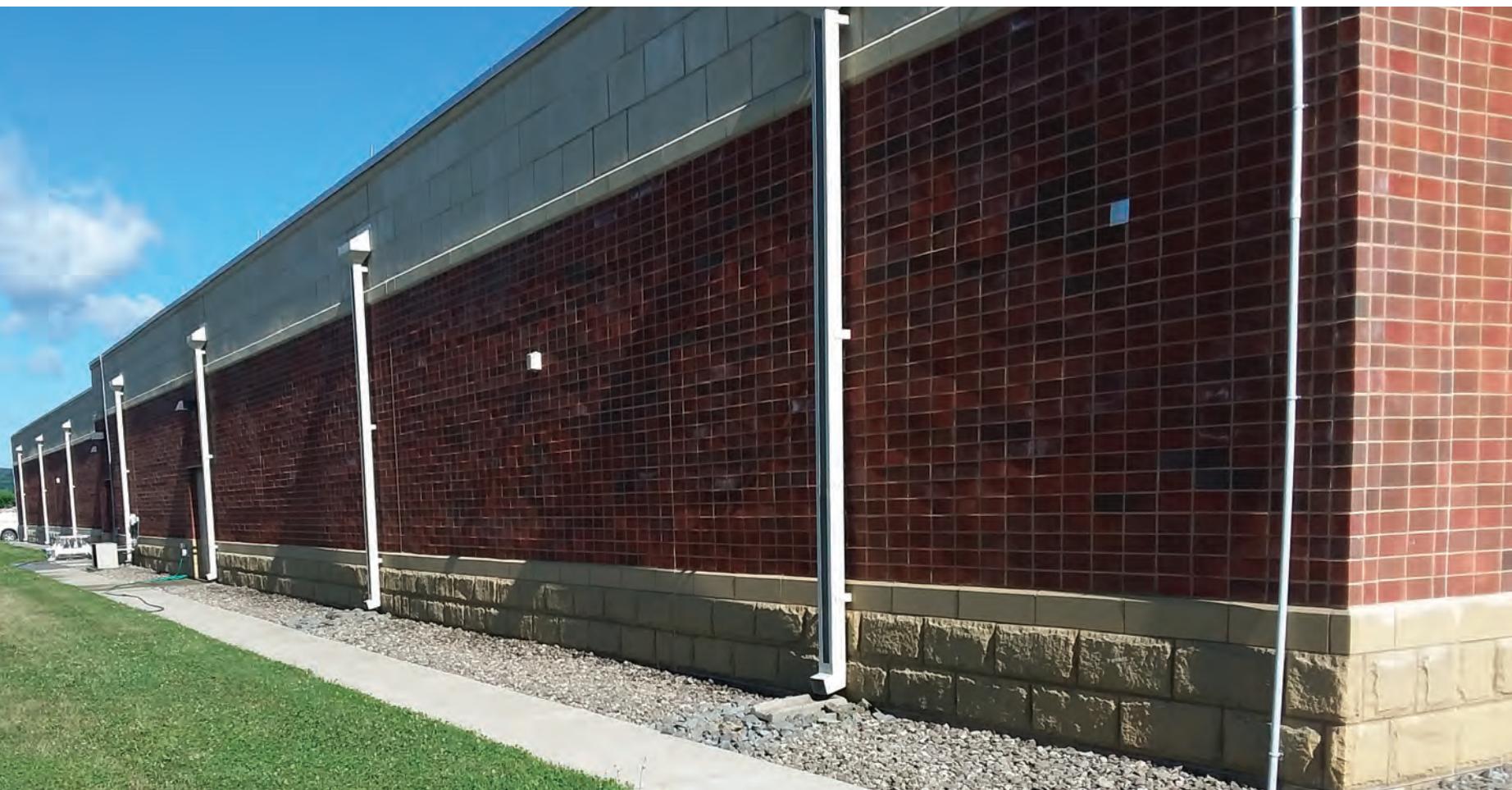














OFF LIMITS
TO UNAUTHORIZED
PERSONNEL



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MECHANICAL