

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY013 BLDG1 Date of Visit: 8/12/20-9/1/20

Contractor Personnel on Site:

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

Service Call Number

css# 22657 wo# 6087

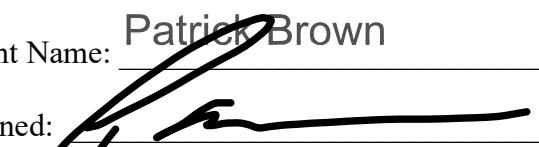
Description of Repairs

I removed the old compressors and dryer filters
and installed new compressors and filters and
tested fridges for proper operation

CERTIFICATION OF WORK

To be signed by the Contractor:

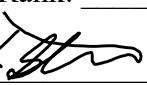
Print Name: Patrick Brown Date: 9/1/20

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: SFC KEVIN STEWART Date: 9/1/20

Signed: 

E-Mail: _____



1-9-20



Asset# 0222 Refrigerator

8-12-20

COMP SK1A1C-L2W
REPL ACU2 AFAM3VVA

1C-L2W
A2413YXA

Turbo
Carson, C



TEMPERATURE



TURBO COOLING



DOOR



FAN



T.O.

88 °F



TEMPERATURE

Assist# 0220 Refrigerator

POWER SWITCH
KEEP POSITION ON

