

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA099 Date of Visit: 12.03.2020

Contractor Personnel on Site:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 23673 WO# 11749

Description of Repairs

removed old stained and broken ceiling tiles.

replaced with new ceiling tiles.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Richard Walker Date: 12.03.2020

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: Don Huson Date: 12.03.2020

Signed: 

E-Mail: _____

