

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: DE002 Date of Visit: 5/11/20

Contractor Personnel on Site:

1. _____	4. _____
2. <b>John Brown</b>	5. _____
3. _____	6. _____

**Service Call Number**

CSS# 23832 WO# 11564

**Description of Repairs**

remove old motor and replace it with new one.

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 5/11/20

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: Joseph Wolfe Date: 5/11/20

Signed: 

E-Mail:

