

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA049 Date of Visit: 7 01.2020

Contractor Personnel on Site:

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

Service Call Number

CSS# 25110 WO# 12186


Description of Repairs

Took Apart Door latch, Removed excess paint
Cleaned latch. Greased latch.
Tested operation. Door shuts/latches
normally

CERTIFICATION OF WORK

To be signed by the Contractor:

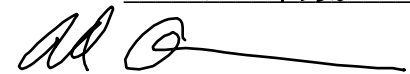
Print Name: Richard Walker Date: 7.01.2020

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: Mark Anderson GS-12 Date: 7.01.2020

Signed: 

E-Mail: m

