

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA050 Date of Visit: 11.13.2020

Contractor Personnel on Site:

- | | |
|--------------------------|----------|
| 1. <u>Richard Walker</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 26070 WO# 13119

Description of Repairs

cleared all clogged roof drains. removed debris, leaf build up.
squeegee rooftop of algae growth from standing water.
cleared leaves and acorns from rooftop edge.
cleared all water and leaves from rooftop. personnel stated water leaking in cage while cleaning

CERTIFICATION OF WORK

To be signed by the Contractor:


Print Name: Richard Walker Date: 11.13.2020

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: UPT T Friend Date: 11.13.2020

Signed: 

E-Mail: _____



