CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: MD002 Date of Visit: 8-25-22 . 8-26-22

Contractor Personnel on Site:

1. DOUG
2. BRUCE
3. OSCAR
4. _____
5. _____
6. _____

Service Call Number

CSS# 2683 WO# 12856

Description of Repairs

RUN CONDUIT, TWO pole WAS NOT WORKING

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: OSCAR MENDEZ Date: 8-26-22

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: Melody Mine SSG Date: 20220826

Signed: Melody M.

E-Mail: _____


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