

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: NY067 BLDG1 Date of Visit: 10/22/20

Contractor Personnel on Site:

1. <u>Patrick Brown</u>	4. _____
2. _____	5. _____
3. _____	6. _____

**Service Call Number**

CSS# 26336 WO# 10246

**Description of Repairs**

I remove the old door handle and insert that was worn out and replaced with a new insert and door handle

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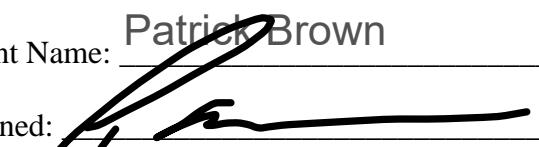
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**CERTIFICATION OF WORK**

To be signed by the Contractor:

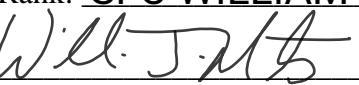
Print Name: Patrick Brown Date: 10/22/20

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: SFC WILLIAM MONTES Date: 10/22/20

Signed: 

E-Mail: \_\_\_\_\_

