

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: NY127 BLDG2 Date of Visit: 10/20/20

Contractor Personnel on Site:

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

**Service Call Number**

CSS# 26354 WO# 10239

**Description of Repairs**

I removed the old battery and ballast and installed a new battery and ballast and rewired correctly I found the emergency lights were wired wrong which cause the battery and ballast to short out then I tested the lights to ensure they worked properly

**CERTIFICATION OF WORK**

To be signed by the Contractor:

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

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 KEVIN HOPPER Date: 10/20/20

Signed: \_\_\_\_\_

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

