

CERTIFICATION OF WORK  
SERVICE CALL

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

FACID/Building: VAO11

Date of Visit: 12/8/20

Contractor Personnel on Site:

1. Address David Solarez
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Service Call Number

CSS# 27505 WO# 0142371

Description of Repairs

Unit # 6 found unit, located leak, removed glycol in lines.  
removed old leaking fitting, fixed and replaced. Add glycol back  
to system. Checked for leaks.

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: David Salazar Date: 12/10/20

Signed: David Salazar

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: Chris Chapp Date: 12/3/20

Signed: Chris Chapp

E-Mail: