

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: VA 011

Date of Visit: 12/7/2020

Contractor Personnel on Site:

1. Moore ~ Charles Murphy
2. _____
3. _____
5. _____
6. _____

Service Call Number

27508
CSS# 270820 WO# COM0142370

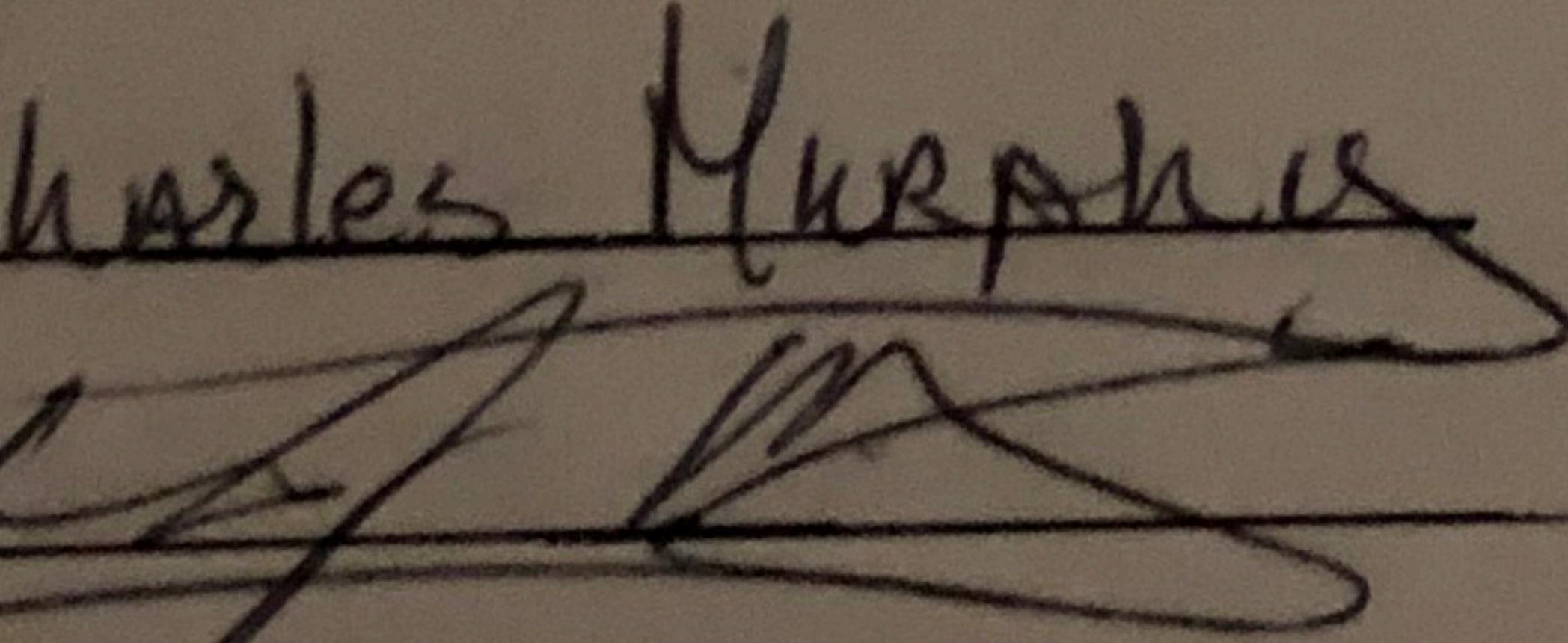
Description of Repairs

~~checked~~ Checked Unit #12 Regel Transformer
and checked all control wire and found
No short before running will rework
and check operations

CERTIFICATION OF WORK

To be signed by the Contractor:

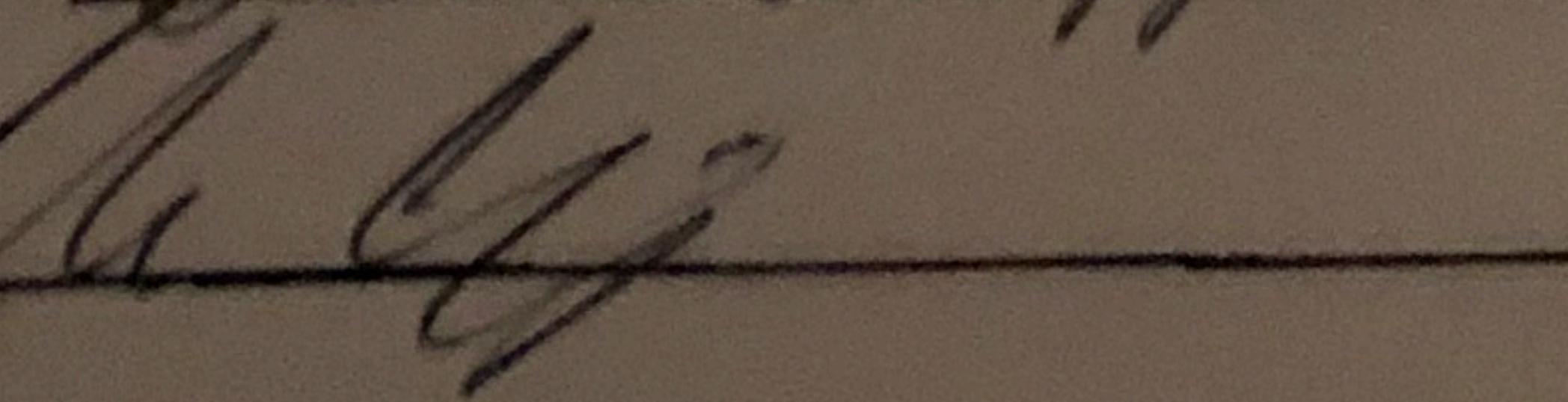
Print Name: Charles Murphy Date: 12-7-20

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: Chris Chipp Date: 10/7/20

Signed: 

E-Mail: _____