

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA049 Date of Visit: 03/08/2021

Contractor Personnel on Site:

- | | |
|--------------------------|----------|
| 1. <u>Richard Walker</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 27533 WO# 13163

Description of Repairs

Coic room wet switch at AHU

wired up secondary pan wet switch, tested to ensure unit shots off if safety is activated.

CERTIFICATION OF WORK


To be signed by the Contractor:

Print Name: Richard Walker Date: 03/08/2021

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:  Date: 03/08/2021

Signed: Kevin R Johnson

E-Mail: _____

