

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA049 Date of Visit: 12.21.2020

Contractor Personnel on Site:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 27534 WO# 13164

Description of Repairs

removed water lines after shutting off water supplies.

removed old faucet, installed new water lines on supply side of valves.

installed new Kohler faucet.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Richard Walker Date: 12.21.2020

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 Chipps Date: 12.21.2020

Signed: 

E-Mail: _____

