

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA048 Date of Visit: 12.01.2020

Contractor Personnel on Site:

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

Service Call Number

CSS# 27757 WO# 13307

Description of Repairs

found toilet not flushing properly, checked flush valve, and flush lever.
flush valve seal has additional hole to right of pressure hole.
removed and installed new valve. to regulate proper flush duration.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Richard Walker Date: 12.01.2020

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: _____ Date: 12.01.2020

Signed: _____

E-Mail: _____

