

**SERVICE CALL CERTIFICATION OF WORK**  
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: MDO19

Date of Visit: 12/05/20

Contractor Personnel on Site:

1. CHRIS
2. \_\_\_\_\_
3. \_\_\_\_\_

4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Work Performed:

Service Calls – Service Call Number and Description

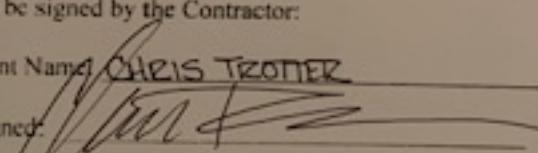
1. CSS# TBD WO# 13320
2. Description of repairs :

SEWER BACK UP; SNAKED FROM ELECTRICAL ROOM  
FLOOR CLEANOUT;

SNAKE FEMALE REST Room  
CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: CHRIS TROTTER Date: 12/05/20

Signed: 

To be signed by Facility Manager or Government Official

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: KENNETH P. AUGUST Date: 5 DEC 2020

Signed: 

E-Mail: KENNETH.P.AUGUST@.CIV.GOV.UK





