

CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: USARC Date of Visit: 8/3/21

Contractor Personnel on Site:

1. Charles Murphy 4. _____
2. Kelvin McBride 5. _____
3. _____ 6. _____

Service Call Number

CSS# 27503 WO# CDMO150895 - NO 13954
CSS 29629

Description of Repairs

ARMSTRONG Pump Replacement.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Will Schultz Date: 08-10-21

Signed: Will Schultz

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: _____

Signed: THONY.1007219551 Digitally signed by
GRENIER.SCOTT.ANTHONY.1007
219551 Date: 2021.08.12 12:54:52 -04'00'

E-Mail: _____

Heat Pump Breakers

PANEL H



