

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: MD019 Date of Visit: 6/3/21

Contractor Personnel on Site:

- |                                 |          |
|---------------------------------|----------|
| 1. <u>B&amp;P Environmental</u> | 4. _____ |
| 2. _____                        | 5. _____ |
| 3. _____                        | 6. _____ |

**Service Call Number**

CSS# 30591 WO# 14186

**Description of Repairs**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Brent Date: 6/3/21

Signed: Brent

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: GS9 MR. NAZE NATHAN Date: 6/3/21

Signed: [Signature]

E-Mail: nathan.a.naze.civ@mail.mil