

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: VA099 Date of Visit: 06/28/2021

Contractor Personnel on Site:

- | | |
|------------------------|----------|
| 1. <u>Mark Younger</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 30807 WO# 14362

Description of Repairs

Removed leaking gas valve from WH-1. Installed new valve and tested for leaks. Started system back
up. Building has hot water now.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Mark Younger Date: 06/28/2021

Signed: Mark Younger

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: Ben Parish, Sr GS-09/ARA Date: 9 JUL 21

Signed: [Signature]

E-Mail: _____

