

## CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: NY067 BLDG1 Date of Visit: 7/15/21

Contractor Personnel on Site:

1. <u>Patrick Brown</u>	4. _____
2. _____	5. _____
3. _____	6. _____

Service Call Number

CSS# 31247 WO# 13997

### Description of Repairs

I found the breaker off on the exhaust hood fan on the roof I took the unit apart and went through it and tested for proper operation. on the oven, the gas was shut off and the pilot light needed to be lit, I tested the oven for proper operation then I shut the gas off again. on the sink faucet I found no leaks and it functions properly

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## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 7/15/21

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: SFC WILLIAM MONTES Date: 7/15/21

Signed: 

E-Mail: \_\_\_\_\_

