

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY051 BLDG2 Date of Visit: 9/24/21

Contractor Personnel on Site:

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

Service Call Number

CSS# 32383 WO# 14856

Description of Repairs

I removed the old diaphragm and washers in the flush valve and
installed a new diaphragm and washer and tested for proper operation

CERTIFICATION OF WORK

To be signed by the Contractor:

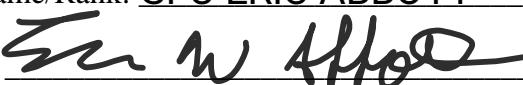
Print Name: Patrick Brown Date: 9/24/21

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 ERIC ABBOTT Date: 9/24/21

Signed: 

E-Mail: _____

