

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: _____ Date of Visit: _____

Contractor Personnel on Site:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Service Call Number

CSS# _____ WO# _____

Description of Repairs

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _____ Date: _____

Signed: cody mae

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: BENJAMIN J PARRISH, SR / ARA Date: 28JAN2022

Signed: _____

E-Mail: BENJAMIN.J.PARRISH.CIV@ARMY.MIL





4953-1323-0001-A SACSM-C076
C8478_P5 4953-1323-0001-A SACSM-C076
F615994A 1604





TRANE

2014-06-23

1610447-06