

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

FACID/Building: MD005

Date of Visit: 11/05 + 11/09

Contractor Personnel on Site:

1. Josh Stephenson
2. _____
3. _____

4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. Flush Valve stuck on toilet 2nd floor Men's Room
2. Changed diaphragm to fix issue but
3. when testing the valve was leaking @ top of
fixture. The spud also needed to be replaced.
Then tested for leaks and that toilet is now flushing

CERTIFICATION OF WORK

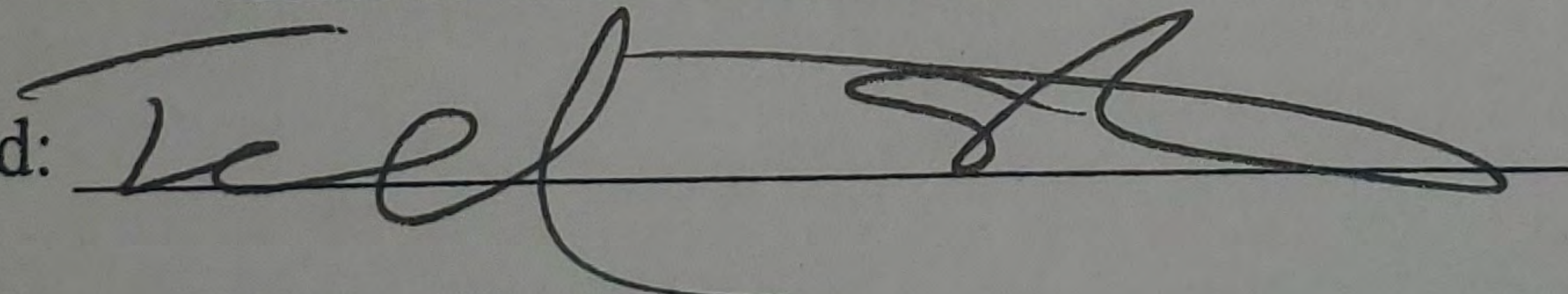
W/O 15399

CS# 33267

To be signed by the Contractor:

Print Name: Josh Stephenson

Date: 11/09

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: _____ Date: 20211122

Signed: Christopher F Huebler

E-Mail: _____





