

CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: MD024 Date of Visit: 3/29/22

Contractor Personnel on Site:

- | | |
|-----------------|--------------------------|
| 1. <u>Shawn</u> | 4. <u>SJS mechanical</u> |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 35148 WO# 18901

Description of Repairs

Installed Weather seals
and Door Sweeps on
Exterior Doors

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Shawn Palmer Date: 3/29/22

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: Dem'el J. Seymore Date: 3/29/22

Signed: Dem'el J. Seymore

E-Mail: _____







EXIT









