

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: MD002 B-2 Date of Visit: 8/26-27/20

Contractor Personnel on Site:

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

Service Call Number

CSS# _____ WO# 12584

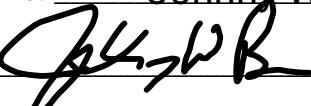
Description of Repairs

I replaced 3 wall HID pack lightbulbs with 3 LED Bulbs. I replaced 8 HID bulbs with 8 LED bulbs on 4 poles. 6 bulbs did not come on. I troubleshooted the 3 poles and they are not getting any voltage up the poles. need to get an electrical contractor out to find the break under ground.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 8/27/20

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: SSG Claudia Voorhies Date: 8/27/20

Signed: 

E-Mail: _____

