

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: MD002 Date of Visit: 09/10/19

Contractor Personnel on Site:

Head Electrical
Mechanic →

1. Shawn Shipley

4. _____

Helper →

2. Malcolm Schlick

5. _____

3. _____

6. _____

Service Call Number

CSS# 13220 WO# 3754 3781

Description of Repairs

Installed new operator, set limits and new bottom weather strip & hoses as well as pneumatic boxes on ALL (3) Doors. Test operations by running the doors multiple times & doors are working good!

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Shawn Shipley Date: 09/10/19

Signed: Shawn Shipley

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: 9/19/19

Signed: Christopher Hustler

E-Mail: _____

DO NOT OPEN DOOR

RSX

EFX

A WARNING
AVERTISSEMENT

