

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY035 BLDG2 Date of Visit: 8/23/19

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Patrick Brown</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 20687 WO# ~~98XX~~ 5103

Description of Repairs

replaced old flush valve and vacuum breaker with a new flush
valve and a new vacuum breaker

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 8/23/19

Signed: 

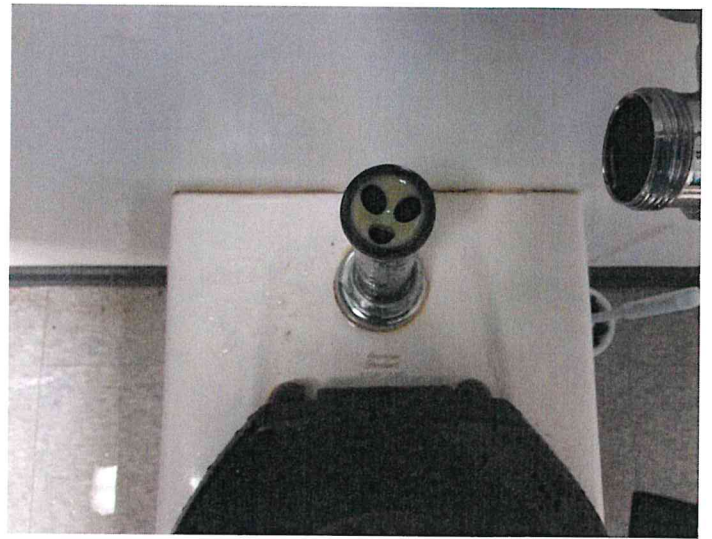
To be signed by Facility Manager:

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:

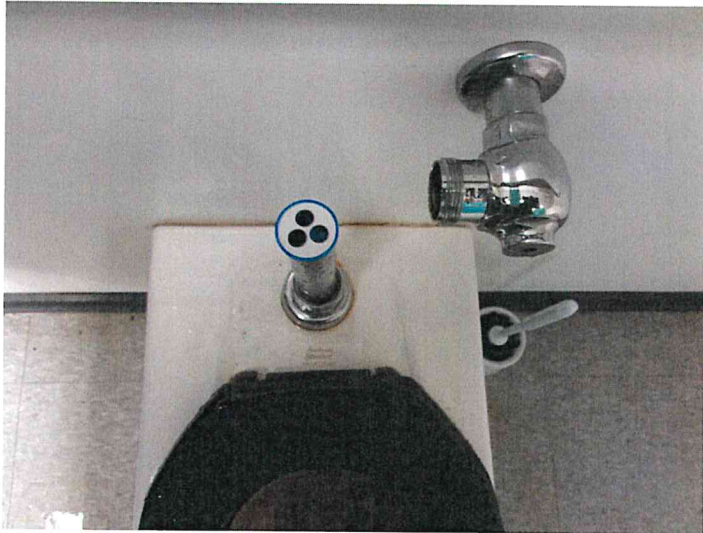
Print Name/Rank: Doug Rushlo AFOS Date: 8/23/19

Signed: 

E-Mail: _____



old flush valve and vacuum breaker



new flush valve and vacuum breaker