

**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: 9/4/19

Contractor Personnel on Site:

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

Service Call Number

CSS# 20688 WO# 5106

Description of Repairs

I removed old push-button station and wiring and installed new push button station and wiring

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 9/4/19

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: 9/4/19

Signed: 

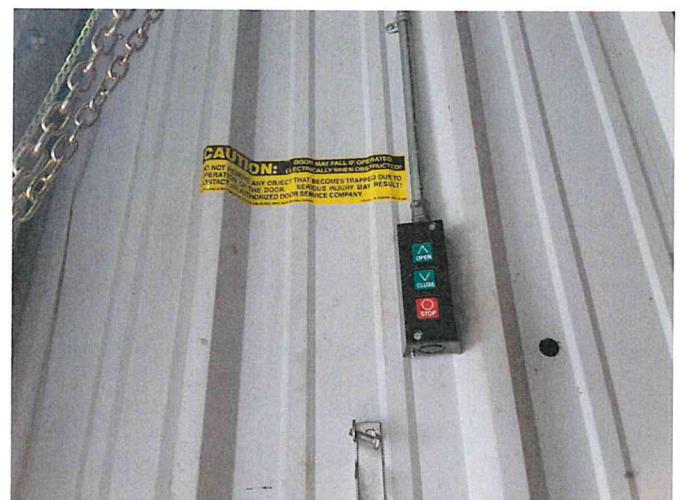
E-Mail: _____



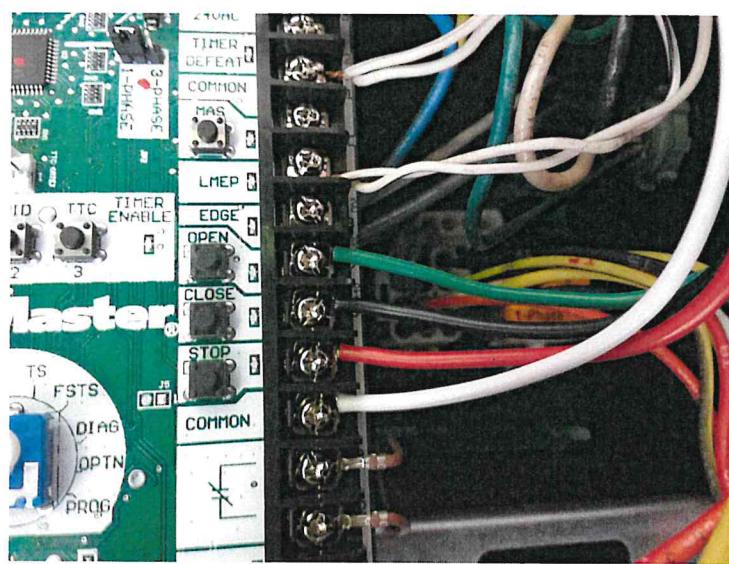
old push button station



new wiring in new push-button station



new push button station



new wiring in control panel