

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: NY127 Date of Visit: 9/21/23

Contractor Personnel on Site:

1. Andy Hunold 4. _____
2. _____ 5. _____
3. _____ 6. _____

Service Call Number

CSS# 93636 WO# 22707

Description of Repairs

Repair atrium window. Low E laminate sealed unit.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Karlee Demain Date: 9/22/23

Signed: *Karlee Demain*

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: _____

Signed:

E-Mail: lars.luffman.civ@army.mil