

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY067 Date of Visit: 7/7/23

Contractor Personnel on Site:

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

Service Call Number

CSS# 93668 WO# 22709

Description of Repairs

Labor and material to a.) set up a cable machine b.) and clear the line c.) clean up
the sewage leftover on the floor with bleach, tileX, and disinfectant spray.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Karlee Demain Date: 7/7/23

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: Ammie Marrero Date: 20230708

Signed: Ammie Marrero

E-Mail: _____