

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: NY052 Date of Visit: 11/15/2023

Contractor Personnel on Site:

1. <u>IRock Plumbing</u>	4. _____
2. _____	5. _____
3. _____	6. _____

Service Call Number

CSS# 94832 WO# 13850

Description of Repairs

Labor and material to repair additional gas leaks. Subcontractor noted to call NYSEG to have them pressure test (we already did and it passed). We typically do this but they were closing for the day so the lead plumber gave them instructions on how to get it approved by NYSEG.
Other than that, the line should be painted in the appropriate yellow color (there is literally paint called, "Yellow Gas Paint") and then directional arrows for the flow plus a 'Natural Gas' label.
What caused the leaks was a combination of age of the lines and them not being painted regularly which caused rust.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Karlee Demain Date: 11/17/2023

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: John F. Granata AFOS Date: 11/17/2023

Signed: John F. Granata

E-Mail: john.f.granata.ctr@army.mil

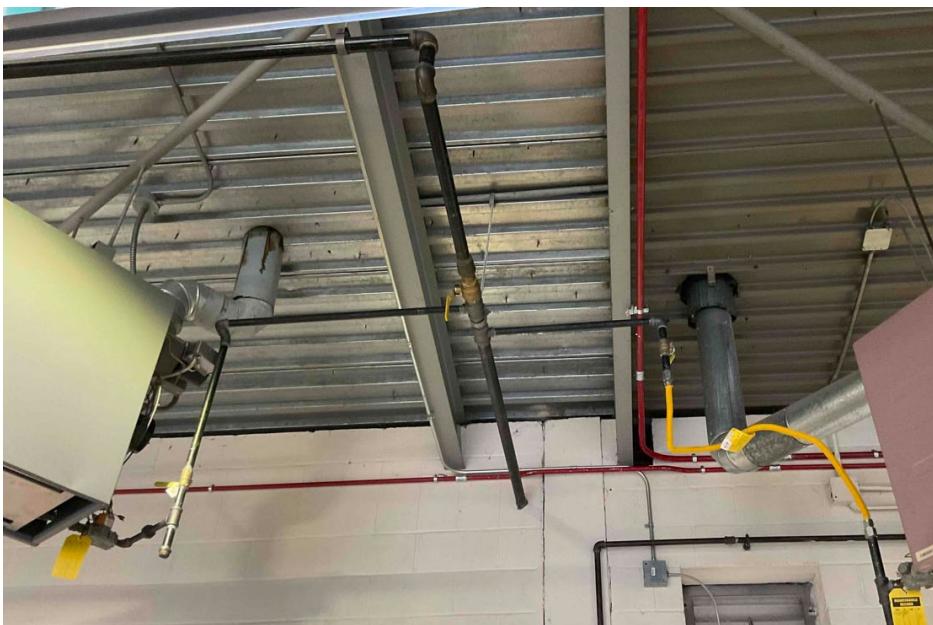
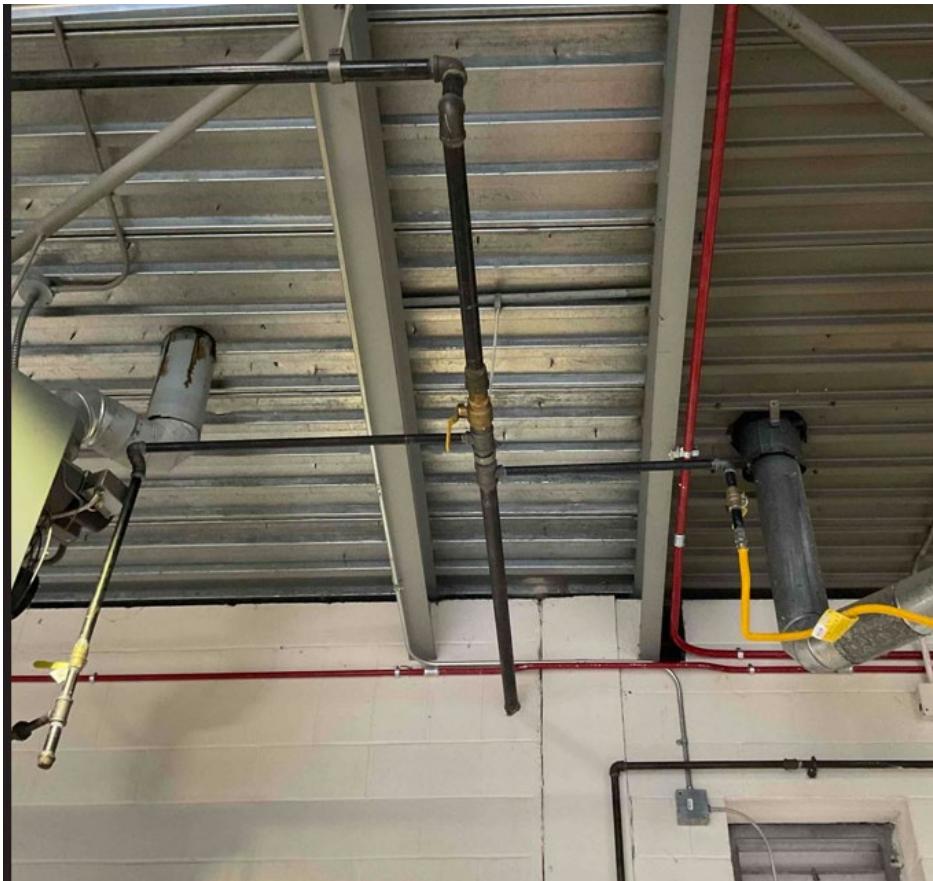


965 North Road
Scottsville, NY 14546





965 North Road
Scottsville, NY 14546





965 North Road
Scottsville, NY 14546

