

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY070 Date of Visit: 10/31/24

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Andrew Hunold</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 98984 WO# 16659

Description of Repairs

Repair garage disposal in first floor break room. (Replaced)



CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Andrew Hunold Date: 10/31/24

Signed: *Andrew J. Hunold*

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 Date: 11/04/2024

Signed: *John F. Granata*

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