

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY070 BLDG1&2 Date of Visit: 5/14/25

Contractor Personnel on Site:

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

Service Call Number

CSS# 3030960 WO# 18463

Description of Repairs

I replaced 2 flush valves in the men's bathroom I replaced one spud In the women's bathroom In building 2 , I replaced 2 spuds in the downstairs women's bathroom and one spud in the upstairs men's bathroom in bldg1. Upon replacing the spud in the women's bathroom downstairs near the weight room I discovered, it also needs a flash valve in the first stall

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 5/14/25

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: John F. Granata AFOS _____ Date: 5/15/25

Signed: _____

John F. Granata

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

