

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: NY070 BLDG1 Date of Visit: 8/27/25

Contractor Personnel on Site:

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

Service Call Number

CSS# 3113651 WO# 18540


Description of Repairs

I removed 3 recessed lights under the awning and installed 3 new surface mount lights and tested for proper operation. I removed 4 sign lights and installed 4 new sign lights and tested for proper operation. I removed 4 recessed lights and installed 4 new recessed lights And found there was no power at the fixtures. We will need A new workorder opened to troubleshoot the power issue
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CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 8/27/25

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 Date: 08/27/2025

Signed: 

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

