

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

CERTIFICATION OF WORK

To be signed by the Contractor:

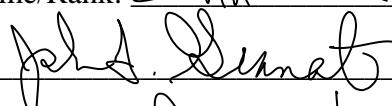
Print Name: Patrick Brown Date: 8/27/25

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. Grana Date: 08/27/2025

Signed: 

E-Mail: jhn.f.granactr@army.mil

