

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: NY052 BLDG1 Date of Visit: 3/11/25

Contractor Personnel on Site:

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

Service Call Number

css# 99067 wo# 16896

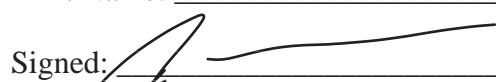
**Description of Repairs**

i isolated the water lines and the gas lines then i unhooked the electrical wiring and the exhaust vent disconnected the water lines and removed the non functioning water heater i then installed the new water heater and dielectric nut unions I reconnected the exhaust vent,electrical, and gas then checked for leaks and proper operation.

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 3/11/25

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: \_\_\_\_\_ Date: 3/11/25

Signed: 

E-Mail: \_\_\_\_\_

