

ATTACHMENT J-0200000-05  
FORMS

CERTIFICATION OF WORK

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

FACID/Building: PA 003 101 to 2 Date of Visit: 5/16/19

Contractor Personnel on Site:

1. Scott Werry
2. GARY Beitzel
3. \_\_\_\_\_

4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Work Performed:

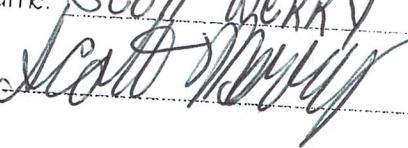
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. 8481 8712
2. 8657
3. 8781
4. 8482

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Werry Date: 5/16/19

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: 16 May 19

Signed: 

OTHER RECURRING SERVICES CERTIFICATION OF WORK  
(To be completed by the Contractor and saved in the Contractor's CMMS)

FacID/Building: 8003-01 Date of Visit: 5/16/19

Contractor Personnel on Site:

1. SCOTT WERRY
2. GARY BERTZEL
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Work Performed:

Other Recurring Services

1. 8589
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Gary Bertzel Date: 5.16.19  
Signed: Gary Bertzel

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: KEITH, SEAN / E-6 Date: 16 May 19

Signed: Keith, Sean

E-Mail:

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
LIGHTING, OUTSIDE

SITE AND BLDG #: *Pp 003-0*LOCATION/RM #: *M68* WO# *8589* ASSET # *795*MECHANIC  
SIGNATURE: *Henry Bentz*DATE: *5/1/15*START TIME: *5:30*FINISH TIME: *5:30*

ITEM #	CHIEF DEFICIENCY DESCRIPTION	BASELINE EQUIPMENT	NOTES/ACTIONS	
			YES	NO
1	In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered to.		/	
2	Schedule and coordinate work with operating personnel.		/	
3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.		/	
TO BE PERFORMED DURING INSPECTION SERVICE				
1	Open and tag switch.			
2	Inspect visual condition of wiring. Look for evidence of overheating.		/	
3	Check for proper light operation.		/	
4	Test operation of automatic switches/ time clock/ photocells if applicable.		/	
5	Inspect light pole and mounting devices for deficiencies.		/	
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.			

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For any deficiencies found exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed description of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes:

*3 R**PK*