

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

FACID/Building: PR 011

Date of Visit: 7/10/19

Contractor Personnel on Site:

1. Tony Lazarus
2. Jim Goertgens
3. Scott Werr

- 4.
- 5.
- 6.

Work Performed:

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

1. 9932
2. 9740
3. 9952
- 4.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Goertgens Date: 7-10-19

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: Ramon E. De La Cruz SGT Date: 7-10-19

Signed: 

E-Mail:

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

Facility/Building: Pa ad-01 Date of Visit: 2/21/19

Contractor Personnel on Site:

1.	<u>Tony Gommis</u>	4.	
2.	<u>Jon Geertgens</u>	5.	
3.		6.	

Work Performed:

Other Recurring Services

1.	<u>9848</u>
2.	
3.	
4.	

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Geertgens Date: 7-10-19
Signed: John W Geertgens

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: Ramon E. De la Cruz SGT Date: 7-10-19
Signed: Pd Feyn

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
LIGHTING, OUTSIDE

SITE AND BLDG #: *Proj 1 -61*LOCATION/RM #: *MEP* WO# *9846* ASSET # *7469*MECHANIC
SIGNATURE: *Tee*DATE: *7/2/18*START TIME: *230*FINISH TIME: *2310*

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETED		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO PROVIDE EXPLANATION)
		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.	<input checked="" type="checkbox"/>		
2	Schedule and coordinate work with operating personnel.	<input checked="" type="checkbox"/>		
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.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Open and tag switch.	<input checked="" type="checkbox"/>		
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>		
3	Check for proper light operation.	<input checked="" type="checkbox"/>		
4	Test operation of automatic switches/ time clock/ photocells if applicable.	<input checked="" type="checkbox"/>		
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>		
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>		

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:

*still on 5 4862
not 6*

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
GATES, FENCES, SECURITY AND ACCESS

SITE AND BLDG #: P0011 -01LOCATION/RM #: MCP WO# 9848 ASSET # 7558MECHANIC
SIGNATURE: DATE: 7/10/19START TIME: 8:00FINISH TIME: 8:10

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
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.		/	
2	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 AT EACH INSPECTION SERVICE				
GATES				
1	Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.	/		
2	Check all locking devices. Lubricate as required.	/		
3	Inspect center gate support rollers and lubricate as required.	/		
4	Clean roller track of any debris.	/		
5	Check bolts, fasteners, and mounting hardware. Tighten or adjust as necessary.	/		
6	Check for any obstructions that retard full swing or movement of the gate.	/		
7	Check that shrubs and trees are pruned clear of gate.	/		
8	Check hold open devices for proper operation. Lubricate as required.	/		
FENCES				
1	Check posts and corner posts, support guys, and horizontal bars between each support post.			
2	Check wire and anchor point; re-stretch and re-anchor if necessary.			
3	Inspect fence anchors along the bottom of the fence and at the point where the fence is connected to the post.			
4	Treat with galvanized protectant where rust has developed.			
5	If approved, apply weed control along entire base of fence. Consult the Safety Data Sheets (SDS) for hazardous ingredients and proper personal protective equipment (PPE).			
6	Check that shrubs and trees are pruned clear of fencing			

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: