

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: PA 011 Date of Visit: 5/7/19

Contractor Personnel on Site:

1. Tony Gorenus
2. Jim Goertzen
3. Scott Werry
4. Greg Betsel
5. _____
6. _____

Work Performed:

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

1. <u>8505</u>	<u>8682</u>
2. <u>8688</u>	<u>8713</u>
3. <u>8780</u>	
4. <u>8485</u>	

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Goertzen Date: 5-7-19

Signed: Jim Goertzen

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: Ramón E. DelaCruz SGT Date: 20190507

Signed: Ramón E. DelaCruz

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

FacID/Building: PA 011 Date of Visit: 5/8/19

Contractor Personnel on Site:

1. Tony Gazeus
2. Jim Gentles
3. Scott Werry
4. Gary Belford
- 5.
- 6.

Work Performed:

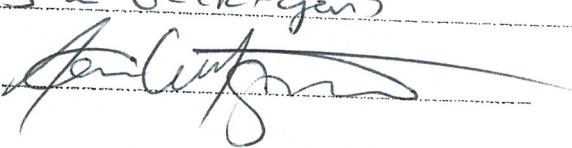
Other Recurring Services

1. 8592
- 2.
- 3.
- 4.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Gentles Date: 5-7-19

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. DelaCruz SGT Date: 20190507

Signed: 

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
Filter Replacement

SITE AND BLDG #: *PA Q11-02*

LOCATION/RM #: *GMW*

MECHANIC SIGNATURE: *[Signature]*

DATE: *5/1/18*

START TIME: *10:30*

FINISH TIME: *11:00*

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
PA Q11	842r	3003	PA 3043	Cedox	GS1/Q36	661063m2	RIR Hatch	GMW

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check, clean, and/or replace both internal and external filters as necessary.			
2	Label and Date Filter			
3	Did YELLOW Maintenance Tag get Initialed			
3	Did all High Asset Filters get Changed			Make sure YELLOW Maint Tag is initialed on Asset
NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO PROVIDE EXPLANATION)				
Q11	Size <i>No filter</i>			

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: GMW **Additional Notes:**

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
Filter Replacement

SITE AND BLDG #: *Ln Q1-C*
LOCATION/RM #: *0A1*

MECHANIC SIGNATURE: *Mark D. Weller* DATE: *5/7/18*
START TIME: *10:30* FINISH TIME: *11:00*

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
<i>Prog 1</i>	<i>8461</i>	<i>3111</i>	<i>R3043</i>					

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE/checked NO, PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check, clean, and/or replace both internal and external filters as necessary.			
2	Label and Date Filter			
3	Did YELLOW Maintenance Tag get Initialed			
3	Did all High Asset Filters get Changed			Make sure YELLOW Maint Tag is initialed on Asset
Qty	Size			NOTES/ACTIONS (IF TASK COMPLETE/checked NO, PROVIDE EXPLANATION)

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: GMW **Additional Notes:**

No filter