

CERTIFICATION OF WORK

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

FACID/Building: PP 020

Date of Visit: 6/13/19

Contractor Personnel on Site:

1. Tony Lazarus
2. Jim Geertgens
3. Scott Berry
- 4.
- 5.
- 6.

Work Performed:

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

1. 9163
2. 9426
3. 9333
4. 9457

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens

Date: 6-13-19

Signed: Jim 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: Timothy SPENERS

Date: 13 JUNE 19

Signed: Timothy SPENERS

E-Mail:

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

FacID/Building: Pr 020

Date of Visit: 6/13/19

Contractor Personnel on Site:

1. Tony Coetzers
2. Jim Geertgens
3. Scott Werg

- 4.
- 5.
- 6.

Work Performed:

Other Recurring Services

1. 9211
- 2.
- 3.
- 4.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Geertgens

Date: 6-13-19

Signed: Anton 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: Timothy S Peters

Date: 13 JUNE 19

Signed: Timothy S Peters

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
LIGHTING, OUTSIDE

SITE AND BLDG #: *Pr 020 - 01*LOCATION/RM #: *MEP* WO# *9211*ASSET # *7428*MECHANIC
SIGNATURE: *Janet*DATE: *6/13/19*START TIME: *515*FINISH TIME: *525*

SPECIAL PROCEDURE OR TEST	DESCRIPTION	PAST COMPLETION		NOTES/ACTIONS (DETAILED 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"/>	<input type="checkbox"/>	
2	Schedule and coordinate work with operating personnel.	<input checked="" type="checkbox"/>	<input 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 type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Open and tag switch.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Check for proper light operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Test operation of automatic switches/ time clock/ photocells if applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>	<input 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 discription of the deficiency.
To be performed by: General Maintenance Worker
Additional Notes:

1
Pc