

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

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

FACID/Building: Proso Date of Visit: 4/9/19

Contractor Personnel on Site:

- | | |
|------------------------|----------|
| 1. <u>Tony Lazarus</u> | 4. _____ |
| 2. <u>Scott Werry</u> | 5. _____ |
| 3. <u>Gary Beitzel</u> | 6. _____ |

Work Performed:


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

- | | |
|----------------|-------|
| 1. <u>8244</u> | _____ |
| 2. <u>8289</u> | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Gary Beitzel Date: 4-9-19

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: Cpt Scott, Aubrey Date: 4-9-19

Signed: 

E-Mail: aubrey.c.sweet.m.1@ma.mil

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

FACID/Building: PA 050 Date of Visit: 4/9/19

Contractor Personnel on Site:

1. <u>Tony</u>	<u>Lazarus</u>	4. _____
2. <u>Scott</u>	<u>Werry</u>	5. _____
3. <u>Gary</u>	<u>Beitzel</u>	6. _____

Work Performed:

Other Recurring Services

1. <u>8371</u>	_____
2. _____	_____
3. _____	_____
4. _____	_____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Gary Beitzel Date: 4-9-19

Signed: Gary Beitzel

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: Cpt Sweet, Abey Date: 4-9-19

Signed: AS

E-Mail: abey.c.sweet.mil@mail.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #:

PA 050-01

MECHANIC

SIGNATURE:

Harry Burtz

DATE:

4/2/19

LOCATION/RM #:

MEP

WO#

8371

ASSET #

2467

START TIME:

FINISH TIME:

CIRCUIT POINT	CIRCUIT/POINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (If task is completed, check box and 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 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 AT EACH 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, take 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:

C

R

Doable