

ATTACHMENT J-0200000-05  
FORMS

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

FACID/Building: P2051 -01 Date of Visit: 8/13/19

Contractor Personnel on Site:

- |                        |          |
|------------------------|----------|
| 1. <u>Tony Gray</u>    | 4. _____ |
| 2. <u>Jim Gueffers</u> | 5. _____ |
| 3. _____               | 6. _____ |

Work Performed:

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

- |                 |       |
|-----------------|-------|
| 1. <u>10455</u> | _____ |
| 2. _____        | _____ |
| 3. _____        | _____ |
| 4. _____        | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Gueffers Date: 8-13-19

Signed: [Signature]

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: CHARLES L SOYNO Date: 13 AUG 2019

Signed: [Signature]

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

FACID/Building: Pr 001 -01 Date of Visit: 8/13/19

Contractor Personnel on Site:

- |                        |          |
|------------------------|----------|
| 1. <u>Tony Green</u>   | 4. _____ |
| 2. <u>Jim Geertman</u> | 5. _____ |
| 3. _____               | 6. _____ |

Work Performed:

Other Recurring Services

- |                 |       |
|-----------------|-------|
| 1. <u>10348</u> | _____ |
| 2. _____        | _____ |
| 3. _____        | _____ |
| 4. _____        | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertman Date: 8-13-19  
Signed: [Signature]

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: CHARLES L. DOYNO Date: 13 AUG 2019  
Signed: [Signature]

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**TIME CLOCK, LIGHTING**

SITE AND BLDG #:

P 051-01

MECHANIC

SIGNATURE:

DATE:

8/13/15

LOCATION/RM #:

119A

WO#

10455

ASSET #

7332

START TIME:

8:10

FINISH TIME:

8:20

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 to.		/	
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			
1	Clean timeclock using a soft lint-free cloth and spray bottle of glass cleaner. Remove any dirt or grease build up.	/		
2	Check physical connections.	/		
3	Verify the timeclock configuration, ensure proper operation.		NA	
4	If applicable, check battery and replace as needed.		NA	

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:

photo eye Controller



**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**TIME CLOCK, LIGHTING**

SITE AND BLDG #:

P2 051 01

MECHANIC  
SIGNATURE:

DATE:

2/13/19

LOCATION/RM #:

215A

WO#

10425

ASSET #

7337

START TIME:

800

FINISH TIME:

810

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 to.		/	
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		
1	Clean timeclock using a soft lint-free cloth and spray bottle of glass cleaner. Remove any dirt or grease build up.	/		
2	Check physical connections.	/		
3	Verify the timeclock configuration, ensure proper operation.		/	
4	If applicable, check battery and replace as needed.		NS	

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: