

CERTIFICATION OF WORK

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

FACID/Building: PROSI - 124

Date of Visit: 6/12/19

Contractor Personnel on Site:

- |                      |          |
|----------------------|----------|
| 1. <u>Tony Cruz</u>  | 4. _____ |
| 2. <u>Jim Gentry</u> | 5. _____ |
| 3. <u>Scott Wemy</u> | 6. _____ |

Work Performed:

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

- |                |       |
|----------------|-------|
| 1. <u>9312</u> | _____ |
| 2. _____       | _____ |
| 3. _____       | _____ |
| 4. _____       | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Cruz Date: 6/12/19

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: CPL VALDES, EDDY R Date: 20/06/17

Signed: [Signature]

E-Mail: eddy.valdes@...

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

FACID/Building: Prosi - 194

Date of Visit: 6/12/19

Contractor Personnel on Site:

1. Tony Lazzari
2. Jim Berghen
3. Scott Werry

4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Work Performed:

Other Recurring Services

1. 9193
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Lazzari

Date: 6/12/19

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: CPL VALDES, ED P 412

Date: 20/9/06/17

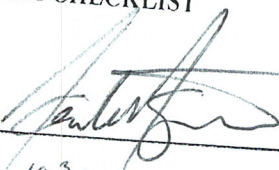
Signed: [Signature]

E-Mail: \_\_\_\_\_

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST GREASE TRAP

SITE AND BLDG #:

Pc 051 - 194

MECHANIC  
SIGNATURE: 

DATE: 6/12/18

LOCATION/RM #:

Kck

WO#

9312

ASSET #

749r

START TIME: 1030

FINISH TIME: 1100

CHECK ITEM	CHECKPOINT DESCRIPTION	PASS/COMPLIANT		NOTES/REMARKS
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
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.			
3	Insure proper grease disposal.			
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Do not use enzymes, acids, caustics, solvents or emulsifying products when cleaning or maintaining the grease traps.			
2	Remove lid. If the trap is equipped with removable baffles, remove them.			
3	Make sure the flow restrictor on the inflow pipe is present.			
4	If damages, missing parts, or cleaning is required, report them as needed to ensure proper working operation.			
5	Replace lid and baffles.			
6	Return (or fill) water to grease trap.			
7	Record grease trap maintenance activities on your log or request a receipt from your grease hauler. Keep records for 3 years.			

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 Technician

Additional Notes: