

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

FACID/Building: Pa 053

Date of Visit: 3/14/19

Contractor Personnel on Site:

1. Tony Lazarus
2. Jim Geertgen
3. Scott Werry

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

Work Performed:

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

1. 7746
2. 7869
3. \_\_\_\_\_
4. \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgen

Date: 3-14-19

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: MAJ Bruce Jordan

Date: 3/14/19

Signed: [Signature]

E-Mail:

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

FACID/Building: PA053 -01

Date of Visit: 3/14/19

Contractor Personnel on Site:

- |                         |          |
|-------------------------|----------|
| 1. <u>Tony Lozano</u>   | 4. _____ |
| 2. <u>Jim Geertgens</u> | 5. _____ |
| 3. <u>Scott Werry</u>   | 6. _____ |

Work Performed:

Other Recurring Services

- |                |       |
|----------------|-------|
| 1. <u>7582</u> | _____ |
| 2. _____       | _____ |
| 3. _____       | _____ |
| 4. _____       | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens Date: 3-14-19

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: MAJ Bruce Jordan Date: 3/14/19

Signed: [Signature]

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

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST GREASE TRAP

SITE AND BLDG #:

P-053-a

MECHANIC

SIGNATURE:

DATE: 3/14/18

LOCATION/RM #:

khlk  
outside

WO# 7746

ASSET # 7482

START TIME: 845

FINISH TIME: 900

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		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: