

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: Pro53-01,02 Date of Visit: 5/13/19

Contractor Personnel on Site:

1. Scott Wehrly
2. GARY BEITZEL
3. _____

4. _____
5. _____
6. _____

Work Performed:

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

1. 6820, 6899, 2346, 5042, 3412
2. _____
3. Walt 8635, 8785, 8874
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Wehrly Date: 5/13/19
Signed: Scott Wehrly

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: Civ Anita Moore Date: 20190513
Signed: Anita Moore
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: 5/13/19

Contractor Personnel on Site:

1. SCOTT HERRY
2. GARY Beitzel
3. _____
4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 7438 WS + 8578
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Herry Date: 5/13/19
Signed: Scott Herry

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: Civ Anita Moore Date: 20190513
Signed: Anita Moore

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST DEHUMIDIFIER

SITE AND BLDG #: PH053-01

LOCATION/RM #:

WO# 8785

ASSET # 5042

MECHANIC
SIGNATURE:

START TIME:

DATE:

5/13/19

FINISH TIME:

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE 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.			
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.			
1	Check water inlet and outlet for any leaks, repair as needed.			
2	Clean and/or replace filter as needed.			
3	If applicable, check hours per usage, replace tanks's as needed			

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For 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:

No Entry