

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

FACID/Building: Pross Date of Visit: 5/31/19

Contractor Personnel on Site:

- |                       |          |
|-----------------------|----------|
| 1. <u>Tony Lopez</u>  | 4. _____ |
| 2. <u>Jim Gault</u>   | 5. _____ |
| 3. <u>Scott Berry</u> | 6. _____ |

Work Performed:

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

- |                |             |
|----------------|-------------|
| 1. <u>8509</u> | <u>8666</u> |
| 2. <u>8638</u> | <u>8742</u> |
| 3. <u>8718</u> | _____       |
| 4. <u>8547</u> | _____       |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Gault Date: 5-31-19  
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: TIMOTHY SPENCER Date: 31 MAY 19  
Signed: [Signature]

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



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

Facility/Building: Peers Date of Visit: 5/2/18

Contractor Personnel on Site:

- |                       |          |
|-----------------------|----------|
| 1. <u>Greg Deitel</u> | 4. _____ |
| 2. _____              | 5. _____ |
| 3. _____              | 6. _____ |

Work Performed:

Other Recurring Services

- |                |       |
|----------------|-------|
| 1. <u>8568</u> | _____ |
| 2. _____       | _____ |
| 3. _____       | _____ |
| 4. _____       | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: S. Ceptgens Date: 5-31-19

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: TIMOTHY S PETERS Date: 31 MAY 19

Signed: [Signature]

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



# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #: PHOTO - 8

LOCATION/RM #: MEP WO# 8568

ASSET # 7821

MECHANIC

SIGNATURE: *George S. [Signature]*

DATE: 5/7/12

START TIME: 530

FINISH TIME: 540

ITEM NO.	DESCRIPTION	COMPLIANCE		REMARKS/NOTES
		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 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.			
4	Open and tag switch.			
5	Inspect visual condition of wiring. Look for evidence of overheating.			
6	Check for proper light operation.			
7	Test operation of automatic switches/ time clock/ photocells if applicable.			
8	Inspect light pole and mounting devices for deficiencies.			
9	For any noted deficiency, takes 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:

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# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #: PA 055-01  
LOCATION/RM #: ME-7 WO# 8068 ASSET # 7428

MECHANIC SIGNATURE: [Signature] DATE: 1/31/19  
START TIME: 530 FINISH TIME: 540

CHECK		REVISIONS		REMARKS/EXCEPTIONS	
NO.	DESCRIPTION	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 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 BY A CMI INSPECTOR					
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, takes 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:

BAC