

A month
new kit

CERTIFICATION OF WORK

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

FACID/Building: PA067-01 Date of Visit: 7/29/2019

Contractor Personnel on Site:

- | | |
|--------------------|----------|
| 1. <u>TOOCHECK</u> | 4. _____ |
| 2. <u>FRIEDMAN</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

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

- | |
|---|
| 1. <u>MOSLER RED LABEL, PM PER LIST</u> |
| 2. <u>SIG 937</u> |
| 3. <u>COMBCHANGE REQUESTED</u> |
| 4. <u>SERIAL # 3450405 (NO ASSET TAG)</u> |
| 5. _____ |
| 6. _____ |

To be signed by the Contractor:

Print Name: Technicians Name CRAIG TOOCHECK Date: 7/29/2019

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: SSG Jorgensen, Brian Date: 29 July 19

Signed: [Signature]

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST VAULT DOOR

SITE AND BLDG #: PA067-01 MECHANIC SIGNATURE: [Signature] DATE: 7/29/2019
LOCATION/RM #: 121A ^{562126#} WO# 3450405 ASSET # NO TAG (PIC) START TIME: _____ FINISH TIME: _____

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.	✓		
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.	N/A		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check alignment of dial ring with lock case; correct if necessary.	✓		
2	Check mounting screws of dial ring and lock case; tighten them, using a thread locking compound.	✓		
3	Look for corrosion or presence of any foreign matter that will in any manner affect the lock's proper operation.	✓		
4	Look for any signs of malfunctioning or impending failure.	✓		
5	Look for any signs of tampering, forced, or covert entry; report this to the local Security and Law Enforcement Office.	✓		
6	Check Alignment of door with frame	✓		
7	Check for difficulty in opening, closing or locking the door.	✓		
8	Replace all defective hardware	✓		NONE

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:

Model

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PA067-01

Asset # 6411-MotionSen-

A more
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CERTIFICATION OF WORK

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

FACID/Building: PA067-01 Date of Visit: 7/29/2019

Contractor Personnel on Site:

- | | |
|--------------------|----------|
| 1. <u>TOOCHUCK</u> | 4. _____ |
| 2. <u>FRIEDMAN</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

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

- | |
|----------------------------|
| 1. <u>GATE SWINGS WELL</u> |
| 2. <u>NO VAULT</u> |
| 3. _____ |
| 4. _____ |
| 5. _____ |
| 6. _____ |

To be signed by the Contractor:

Print Name: Technicians Name CRAIG TOOCHUCK Date: 7/29/2019

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: SSG Jorgensen Bora Date: 29 July 19

Signed: [Signature]

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **VAULT DOOR**

SITE AND BLDG #: PA067-01

**MECHANIC
SIGNATURE:** C. J. Sal

DATE: 7/29/2019

LOCATION/RM #: 201 **WO#** NONE **ASSET #** NONE

START TIME: 1050

FINISH TIME: 1100

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.	✓		
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.	N/A		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check alignment of dial ring with lock case; correct if necessary.	✓		
2	Check mounting screws of dial ring and lock case; tighten them, using a thread locking compound.	✓		
3	Look for corrosion or presence of any foreign matter that will in any manner affect the lock's proper operation.	✓		GATE
4	Look for any signs of malfunctioning or impending failure.	✓		
5	Look for any signs of tampering, forced, or covert entry; report this to the local Security and Law Enforcement Office.	✓		
6	Check Alignment of door with frame	✓		
7	Check for difficulty in opening, closing or locking the door.	✓		
8	Replace all defective hardware	✓		NONE

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:

PA067-01
Asset # 6426-MotionSys-

