

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: Pp 096

Date of Visit: 3/22/19

Contractor Personnel on Site:

1. Tony Lazarus
2. Scott Werry
3. _____

4. _____
5. _____
6. _____

Work Performed:

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

1. 7484 7799
2. 7686 7967
3. 7749 _____
4. 8019 _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Werry Date: 3/22/19

Signed: Scott Werry

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: Hannah Flonian GS09 Date: 3/22/19

Signed: Hannah Flonian

E-Mail: hannah.l.flonian.civ@mail.mil

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

FacID/Building: Po 096 - Date of Visit: 3/22/19

Contractor Personnel on Site:

1. Tony Lazarus
2. Scott Werry
3. _____
4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 7590
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Werry Date: 3/22/19
Signed: Scott Werry

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: Hannah Florian GS-09 Date: 3/22/19
Signed: Hannah Florian

E-Mail: hannah.l.florian.civ@mail.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
LIGHTING, OUTSIDE

SITE AND BLDG #: *P1 096-01*LOCATION/RM #: *M6P* WO# *7590* ASSET # *7443*MECHANIC
SIGNATURE:

START TIME:

DATE:

3/22/19

FINISH TIME:

6:45AM

ITEM	DESCRIPTION	TASK COMPLETED		NOTES/ACTIONS (INCLUDES COMPLETED, DEFERRED, AND PENDING 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 to.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	Schedule and coordinate work with operating personnel.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Open and tag switch.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3	Check for proper light operation.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
4	Test operation of automatic switches/ time clock/ photocells if applicable.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

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:

*2 pc Single**one in Back test covers**15 out*

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
LIGHTING, OUTSIDESITE AND BLDG #: *Pr 086-01*LOCATION/RM #: *Prabon* WO# *7590* ASSET # *7461*MECHANIC
SIGNATURE: *Mark Brown*DATE: *3/22/19*START TIME: *6:30AM*FINISH TIME: *6:45AM*

ITEM	DESCRIPTION	SPECIAL INSTRUCTIONS	TASK COMPLETED		NOTES/ACTIONS IF DURING COMPLETION OF THIS CHECKLIST PROVIDED EXPANSION
			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.		<i>Y</i>	<i>Y</i>	
2	Schedule and coordinate work with operating personnel.		<i>Y</i>		
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.		<i>Y</i>		
TO BE PERFORMED AT EACH INSPECTION SERVICE					
1	Open and tag switch.		<i>Y</i>		
2	Inspect visual condition of wiring. Look for evidence of overheating.		<i>Y</i>		
3	Check for proper light operation.		<i>Y</i>		
4	Test operation of automatic switches/ time clock/ photocells if applicable.		<i>Y</i>		
5	Inspect light pole and mounting devices for deficiencies.		<i>Y</i>		
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.		<i>Y</i>		

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:

5 pc Double

2 out above Dumper

2 out in Back lot

1 out on left side by ons