

ATTACHMENT J-0200000-05  
FORMS

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

FACID/Building: Pr 086

Date of Visit: 8/20/19

Contractor Personnel on Site:

1. Scott Werry

4.

2. \_\_\_\_\_

5. \_\_\_\_\_

3. \_\_\_\_\_

6. \_\_\_\_\_

Work Performed:

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

1. 10187

2. 10437

3. \_\_\_\_\_

4. \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Werry

Date: 8/20/19

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: Booth, Ericka M

Date: 20190820

Signed: Ericka M Booth

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

FacID/Building: 10096-01 Date of Visit: 8/20/19

Contractor Personnel on Site:

1. Scott Werry

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

Work Performed:

Other Recurring Services

1. 10367

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Scott Werry Date: 8/20/19  
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: Booth, Enrica Date: 20190820  
Signed: EBR

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
*Filter Replacement*

SITE AND BLDG #: Pr 96-01  
LOCATION/RM #: DICE 1104

MECHANIC SIGNATURE: *Scott M. Kelly* DATE: 8/20/18  
START TIME: 8:00 FINISH TIME: 8:15

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
Pr 96-01	10187	3039	403039	McQUAY	410	3666624-06	AIR 1M16	DICE

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check, clean, and/or replace both internal and external filters as necessary.	<i>✓</i>		
2	Label and Date Filter	<i>✓</i>		
3	Did YELLOW Maintenance Tag get Initialed	<i>✓</i>		
3	Did all High Asset Filters get Changed	<i>✓</i>		Make sure YELLOW Maint Tag is initialed on Asset
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
6	16X20XAPL	<i>✓</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: GMW **Additional Notes:**

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
Filter Replacement

SITE AND BLDG #: Pa 096-01

LOCATION/RM #: Penn Hall

MECHANIC SIGNATURE:

DATE:

START TIME: 8:15

FINISH TIME: 8:30

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
Pa	101(E) 300-0	PC35P	McQUAY LIAD	MC12	3698623	-06	AIR Filter	Pa

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check, clean, and/or replace both internal and external filters as necessary.	<input checked="" type="checkbox"/>		
2	Label and Date Filter	<input checked="" type="checkbox"/>		
3	Did YELLOW Maintenance Tag get Initialed	<input checked="" type="checkbox"/>		
3	Did all High Asset Filters get Changed	<input checked="" type="checkbox"/>		Make sure YELLOW Maint Tag is initialed on Asset
Qty	Size			NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
10	16X20X2PL			

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: GMW **Additional Notes:**