

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: Pa166-6B Date of Visit: 8-23-19

Contractor Personnel on Site:

1. Dominic Stango 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

**Work Performed:**

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

1. WFF 10299, 10393  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Dominic Stango Date: 8-23-19  
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: J. Timothy S. Peters Date: 23 AUG 19  
Signed: [Signature]  
E-Mail: \_\_\_\_\_

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

Filter Replacement

**SITE AND BLDG #:** Pal 66-6B

**MECHANIC SIGNATURE:**  **DATE:** 8-23-19

**LOCATION/RM #:** 16004

**START TIME:** 8:30 **FINISH TIME:** 8:25

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
Pal 66-6U	16004	4691		Carrier			eru	16004

CHECK POINT	CHECKPOINT DESCRIPTION	TO BE PERFORMED AT EACH INSPECTION SERVICE		TASK COMPLETE YES      NO	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO. PROVIDE EXPLANATION)	
		1	2		3	4
1	Check, clean, and/or replace both internal and external filters as necessary.	✓				
2	Label and Date Filter	✓				
3	Did YELLOW Maintenance Tag get Initialed	✓			Make sure YELLOW Maint Tag is initialed on Asset	
3	Did all High Asset Filters get Changed	✓				
Qty	Size				NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO. PROVIDE EXPLANATION)	
2	14X25X2					

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 #: **166-63**

MECHANIC  
SIGNATURE: 

DATE: 8-23-19

LOCATION/RM #: 100f

START TIME: 8:35

FINISH TIME: 8:40

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
1066-6B	10299	4692		Carrier			Enc	1004

**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:**