

ATTACHMENT J-0200000-05  
FORMS

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

FACID/Building: Pa 193 Date of Visit: 8/13/19

Contractor Personnel on Site:

- |                       |          |
|-----------------------|----------|
| 1. <u>Tony Corrao</u> | 4. _____ |
| 2. <u>Jim Gersten</u> | 5. _____ |
| 3. _____              | 6. _____ |

Work Performed:

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

- |                 |       |
|-----------------|-------|
| 1. <u>10438</u> | _____ |
| 2. _____        | _____ |
| 3. _____        | _____ |
| 4. _____        | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Corrao Date: 8/13/19  
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: K. Myslinski Date: 8/13/19  
Signed: K. Myslinski

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

FACID/Building: P. 123

Date of Visit: 8/13/19

Contractor Personnel on Site:

1. Tony Lozano  
2. Jim Leers  
3. \_\_\_\_\_

4. \_\_\_\_\_  
5. \_\_\_\_\_  
6. \_\_\_\_\_

Work Performed:

Other Recurring Services

1. 10309  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Lozano

Date: 8/13/19

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: K. Myslenski

Date: 8/13/19

Signed: K. Myslenski

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

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST EMERGENCY GENERATORS

SITE AND BLDG #:

Pa 193

MECHANIC  
SIGNATURE:

Tye

LOCATION/RM #:

Wechs  
row

WO#

10338

ASSET #

6766

START TIME:

0800

DATE:

8/13/18

FINISH TIME:

0930

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE 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.		✓	
2	Review and follow manufacturer's instructions. One copy of the instruction manual(s) shall be kept in a secure, convenient location near the equipment and another kept in a different location.		✓	
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	A written record of all inspections, service, tests, operation, and repairs to the emergency generator shall be maintained in an equipment log book and kept on the premises. This record shall include the date of maintenance, identity of service personnel, and notation of any unsatisfactory condition and the corrective action taken, including parts order on hand.	✓		
5	Have a properly serviced fire extinguisher in proper working order on hand.	✓		
6	Follow NFPA 110 and 111 for operation and maintenance requirements.	✓		
1	Fuel, check main and day tank fuel supply levels; day tank float switch; piping, hoses and connectors; operating fuel pressure; and for any obstructions to tank vents and overflow piping		✓	

K00-047CMI Management Inc.

2. Oil (check for proper oil level and oil operating pressure; lube oil heater)
  - Engine oil level should be checked with the unit stopped
  - Check unit for recommended proper oil pressure
3. Cooling system (check coolant level, water pump(s), jacket water heater, belts, hoses, fan)
4. Exhaust system, check for leaks while unit is running.
5. Battery system (look for possible corrosion; check specific gravity, electrolyte level (a level between 1250 and 1275 is acceptable) and battery charger. Use distilled water to maintain battery water level.)
6. Electrical (conduct a general inspection of wiring and connections; check circuit breakers/fuses, look for
7. Generator (Check for debris, foreign objects, loose or broken fittings; check guards and components; look for any unusual condition of vibration, leakage, noise, temperature or deterioration)

N/A

N/A

N/A

N/A

✓

N/A

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For 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:

PJS



# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST EMERGENCY GENERATORS

SITE AND BLDG #:

R 193

MECHANIC  
SIGNATURE:

Jg x

DATE:

8/15/13

LOCATION/RM #:

0073/4

WO#

16339

ASSET #

6749

START TIME:

0800

FINISH TIME:

0822

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE 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.		✓	
2	Review and follow manufacturer's instructions. One copy of the instruction manual(s) shall be kept in a secure, convenient location near the equipment and another kept in a different location.		✓	
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	A written record of all inspections, service, tests, operation, and repairs to the emergency generator shall be maintained in an equipment log book and kept on the premises. This record shall include the date of maintenance, identity of service personnel, and notation of any unsatisfactory condition and the corrective action taken, including parts order on hand.	✓		
5	Have a properly serviced fire extinguisher in proper working order on hand.	✓		
6	Follow NFPA 110 and 111 for operation and maintenance requirements.	✓		
1	Fuel, check main and day tank fuel supply levels; day tank float switch; piping, hoses and connectors; operating fuel pressure; and for any obstructions to tank vents and overflow piping	✓		5/8

2. Oil (check for proper oil level and oil operating pressure; lube oil heater)
  - Engine oil level should be checked with the unit stopped
  - Check unit for recommended proper oil pressure
3. Cooling system (check coolant level, water pump(s), jacket water heater, belts, hoses, fan)
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Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For 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: