

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: WU41 Date of Visit: 8-22-19

Contractor Personnel on Site:

1. Jim Geertgens
2. Scott Wickey
3. _____
4. _____
5. _____
6. _____

Work Performed:

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

1. 10196
2. 10433
3. 10243
4. 10467

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens Date: 8-22-19

Signed: Jim Geertgens

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: Julie L. Bau Date: 20190822

Signed: Julie L. Bau

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

FacID/Building: WV 001-002 Date of Visit: _____

Contractor Personnel on Site:

1. Tom Gceelgans
2. SCOTT WERKJ
3. _____
4. _____
5. _____
6. _____

Work Performed:

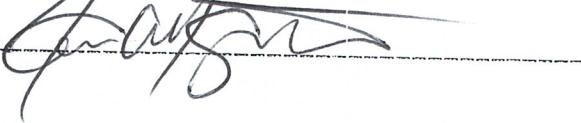
Other Recurring Services

1. 10324
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tom Gceelgans Date: 8-22-19

Signed: 

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: Julia L. Barr Date: 20190822

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
Filter Replacement

SITE AND BLDG #: **WV 041 - 01**
LOCATION/RM #: **Boiler Room**

MECHANIC SIGNATURE: 

DATE: **8/20/18**

START TIME: **9:15**

FINISH TIME: **9:30**

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
Boiler Room	1618 3053	K43-54	TRANE	KO9151	KO9167218		A164	Boiler Room

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPOSITE		NOTES/ACTIONS (IF TASK COMPLETELY CHECKED AND PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check, clean, and/or replace both internal and external filters as necessary.	—		
2	Label and Date Filter	—		
3	Did YELLOW Maintenance Tag get Initiated	—		Make sure YELLOW Maint Tag is initialed on Asset
3	Did all High Asset Filters get Changed	—		
SIZZ				
	20X20 P2 - 4			

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 #: WV 041-01

MECHANIC SIGNATURE: *John*

DATE: 8/22/19

LOCATION/RM #: Boiler Room

START TIME: 900

FINISH TIME: 915

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
Boiler Room	10186	3142	PQ3053	TRANE		K8GMK5089	MU 1	Boiler Room
<i>TUD1603AE0A3DRR03</i>								
CHECK POINT	CHECKPOINT DESCRIPTION				TASK COMPLETE	NOTES/ACTIONS	NOTES/ACTIONS (IF TASK COMPLETE CHECK BOX, NO PROVIDE EXPLANATION)	
					YES	NO		
TO BE PERFORMED AT EACH INSPECTION SERVICE								
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				/	/		
4	Size				/	/	NOTES/ACTIONS (IF TASK COMPLETE CHECK BOX, NO PROVIDE EXPLANATION)	
	10x20x2 Poly				/	/		
					/	/		
					/	/		
					/	/		

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 #: WV 041-01

LOCATION/RM #: Bunker Room 2

MECHANIC SIGNATURE:

DATE:

8/22/19

START TIME:

FINISH TIME:

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
Bunker Room 2	101963162	RQ3553	TRANE			K09L51932	RTU - 1	Bunker Room 2

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE, CHECKED, NO PROVIDED EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
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 Initiated	<input checked="" type="checkbox"/>		Make sure YELLOW Maint Tag is initialed on Asset
3	Did all High Asset Filters get Changed	<input checked="" type="checkbox"/>		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
4.1	Size			NOTES/ACTIONS (IF TASK COMPLETE, CHECKED, NO PROVIDED EXPLANATION)
	20 x 25 x 2 - 4			

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:**