

ATTACHMENT J-0200000-05  
FORMS

CERTIFICATION OF WORK

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

FACID/Building: WV041-01 Date of Visit: 7/26/2019

Contractor Personnel on Site:

- |                    |          |
|--------------------|----------|
| 1. <u>Toocheck</u> | 4. _____ |
| 2. _____           | 5. _____ |
| 3. _____           | 6. _____ |

**Work Performed:**

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

- |   |
|---|
| 1. <u>MOSLER BLACK LABEL, PARCHMENT COLOR ✓</u> |
| 2. <u>MR 302 HAND</u>                           |
| 3. <u>NO COMB CHANGE REQUESTED</u>              |
| 4. <u>PM PER LIST</u>                           |
| 5. _____  |
| 6. _____  |

To be signed by the Contractor:

Print Name: Technicians Name CRAIG TOOCHECK Date: 7/26/2019

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: SSG JIN DANIEL Date: 7/26/19

Signed: [Signature]

E-Mail: daniel.y.jin.mil@mail.mil

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **VAULT DOOR**

SITE AND BLDG #: WV041-01MECHANIC  
SIGNATURE: *J. J. Loeel*DATE: 7/26/2019LOCATION/RM #: L WO# 9777 ASSET # 7915START TIME: 7:50 AMFINISH TIME: 8:00 AM

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO. PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
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.	✓		
2	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	N/A		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check alignment of dial ring with lock case; correct if necessary.	✓		
2	Check mounting screws of dial ring and lock case; tighten them, using a thread locking compound.	✓		
3	Look for corrosion or presence of any foreign matter that will in any manner affect the lock's proper operation.	✓		
4	Look for any signs of malfunctioning or impending failure.	✓		
5	Look for any signs of tampering, forced, or covert entry; report this to the local Security and Law Enforcement Office.	✓		
6	Check Alignment of door with frame	✓		
7	Check for difficulty in opening, closing or locking the door.	✓		
8	Replace all defective hardware	✓		NONE

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 discription of the deficiency.

To be performed by: General Maintenance Worker

**Additional Notes:**

PROTECTED  
SYSTEM

RESTRICTED AREA  
WARNING

RESTRICTED AREA OF  
WORK IS DESIGNATED BY A  
SIGN OF THE SECURITY OF SERVICE  
AND THE PROHIBITION OF ENTRY  
AT 1988. RESTRICTED ENTRY IS  
ALSO PROHIBITED BY OTHER  
MEANS. SECURITY SERVICE  
OFFICIALS OF THE AREA OF THE  
RESTRICTED AREA OF THE  
RESTRICTED AREA OF THE

20, para 4.32

RESTRICTED AREA  
WARNING

RESTRICTED AREA  
WARNING

Model

RESTRICTED AREA  
WARNING



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WV041-01

Asset # 7915-ArmsVault-