

ATTACHMENT J-0200000-05  
FORMS

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

FACID/Building: WV053

Date of Visit: 3/25/19

Contractor Personnel on Site:

1. Tony Lazarus
2. Jim Geertgens
3. Scott Werry

- 4.
- 5.
- 6.

**Work Performed:**

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

|                |             |
|----------------|-------------|
| 1. <u>7730</u> | <u>7783</u> |
| 2. <u>7768</u> | <u>7949</u> |
| 3. <u>8023</u> | <u>7732</u> |
| 4. <u>7734</u> |             |

**CERTIFICATION OF WORK**

*BK*

To be signed by the Contractor:

Print Name: Jim Geertgens

Date: 3-25-19

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: Don Showalter Date: 25 MAR 19

Signed: 

E-Mail:

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

FacID/Building: WU 053-01 Date of Visit: 3/25/19

Contractor Personnel on Site:

|                        |          |
|------------------------|----------|
| 1. <u>Tony Lorus</u>   | 4. _____ |
| 2. <u>Jon Geertges</u> | 5. _____ |
| 3. <u>Scott Berry</u>  | 6. _____ |

Work Performed:

Other Recurring Services

|                |          |
|----------------|----------|
| 1. <u>7548</u> | 4. _____ |
| 2. _____       | 5. _____ |
| 3. _____       | 6. _____ |
| 4. _____       | 7. _____ |

**CERTIFICATION OF WORK**

*DC*

To be signed by the Contractor:

Print Name: Jon Geertges Date: 3-25-19

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: Don Showalter Date: 25 MAR 19

Signed: 

E-Mail:

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**TANKS, WATER STORAGE**

SITE AND BLDG #: WU053-03LOCATION/RM #: 00304 WO# 732ASSET # 507MECHANIC  
SIGNATURE: John W. JohnsonDATE: 3/2/18START TIME: 9:05FINISH TIME: 9:30

| CHECK<br>ITEM | DESCRIPTION  | WORK COMPLETED |     | NOTES/REMARKS<br>(DIRECTIONS FOR PERFORMING MAINTENANCE) |
|---------------|--|----------------|-----|--|
|               |  | 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             | Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.                      |                | /   |  |
| 1             | Examine exterior of tank including fittings, manholes, and handholes for leaks, signs of corrosion, and correct as indicated.  | /              |     |  |
| 2             | Inspect structural supports and repair or replace damaged insulation or covering. If insulation contains asbestos and is damaged or eroded, it is considered a hazardous waste.  | /              |     |  |
| 3             | Clean, test and inspect sight glasses, valves, fittings, drains, and controls.   | /              | N/A |  |
| 4             | Clean up work site.  | /              |     |  |

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: General Maintenance Worker

Additional Notes:

b/f