

CERTIFICATION OF WORK

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

FACID/Building: WV053

Date of Visit: 6-24-19

Contractor Personnel on Site:

1. Jim Geertgens

2. Scott Vicky

3. _____

4. _____

5. _____

6. _____

Work Performed:

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

1. 9084

9368

9319

2. 9201

~~9083~~

9393

3. 9293

9083

9294

4. 9310

9295

9422

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens

Date: 6-24-19

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: Adrian P Popik

Date: 2019 0624

Signed: _____

E-Mail: _____

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

FACID/Building: WV 053 Date of Visit: 6-24-19

Contractor Personnel on Site:

1. Jim Geggans
2. Scott Werry
3. _____
4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 9201
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geggans Date: 6-24-19

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: Andrew P. Porik Date: 2019.06.24

Signed: [Signature]

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST TANKS, WATER STORAGE

SITE AND BLDG #: WV053-02MECHANIC
SIGNATURE: [Signature]DATE: 6-24-19LOCATION/RM #: Boiler Rm WO# 9295 ASSET # 5019START TIME: 9:50FINISH TIME: 9:25

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|---|--|---------------|----|--|
| | | YES | NO | |
| SPECIAL INSTRUCTIONS | | | | |
| 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. | | - | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 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. | | | |
| 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 discription of the deficiency.
To be performed by: General Maintenance Worker

Additional Notes: