

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

FACID/Building: PC020-01402 Date of Visit: 12/20/18

Contractor Personnel on Site:

1. Tom Lenzus
2. Jim Geertsen
3. Scott Werny
4. Ronk Sappera
5. _____
6. _____

Work Performed:

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

1. 6692
2. 6599
3. 6723
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertsen Date: 12-20-18

Signed: Jim Geertsen

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: Timothy S Peters Date: 20 DEC 18

Signed: Timothy S Peters

E-Mail:

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

FacID/Building: Pr 020 - 01 Date of Visit: 12/20/18

Contractor Personnel on Site:

1. Tony Lazzari
2. Jim Geffgens
3. Scott Wren
4. Ronk Sperio
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 6478
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geffgens Date: 12-20-18
Signed: Jim Geffgens

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: Timothy S Peters Date: 20 Dec 18
Signed: Timothy S Peters

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
VEHICLE EXHAUST REMOVAL

SITE AND BLDG #: *Pr 020 - 02*LOCATION/RM #: *0M1* WO# *6898* ASSET # *8070*MECHANIC
SIGNATURE: *Paul Shurtliff*DATE: *12/26/05*START TIME: *10:00 AM*FINISH TIME: *10:30 AM*

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES NO	SPECIAL INSTRUCTIONS		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
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.	<input checked="" type="checkbox"/>			
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.	<input checked="" type="checkbox"/>			
1	Start and stop fan with local switch	<input checked="" type="checkbox"/>			
2	Check motor and fan shaft bearings for noise, vibration, overheating; lubricate bearings.	<input checked="" type="checkbox"/>			
3	Inspect, adjust belts and pulleys. Replace belt as needed.	<input checked="" type="checkbox"/>			
4	Clean dampers; lubricate pivot points (annually) and inspect linkages for tightness.	<input checked="" type="checkbox"/>			
5	Inspect fan for bent blades, unbalance, excessive noise and vibration.	<input checked="" type="checkbox"/>			
6	Clean fan as needed.	<input checked="" type="checkbox"/>			
7	Visually inspect exhaust system tubing and/or duct work for any damage that could result in leaks.	<input checked="" type="checkbox"/>			
8	Repair as needed	<input checked="" type="checkbox"/>			

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:

4L430 Belt