

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: 12/26/18

Contractor Personnel on Site:

1. <u>Tony Green</u>	4. <u>Randy Sappier</u>
2. <u>Jim Geeffgens</u>	5. _____
3. <u>Scott Werry</u>	6. _____

Work Performed:

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

1. <u>6558</u>	<u>6585</u>
2. <u>6576</u>	<u>6659</u>
3. <u>6634</u>	<u>6688</u>
4. <u>6560</u>	<u>6559</u>

CERTIFICATION OF WORK

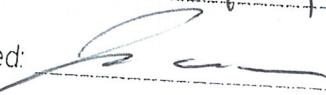
To be signed by the Contractor:

Print Name: Jim Geeffgens  
Signed: 

Date: 12-26-18

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: Mark Jason SSG  
Signed: 

Date:

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: 12/26/18

Contractor Personnel on Site:

1. Tony Lazzari
2. Jim Geertges
3. Scott Harry
4. JK Parkle Super 22
5. \_\_\_\_\_
6. \_\_\_\_\_

Work Performed:

Other Recurring Services

1. 646Y
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Jim Geertges Date: 12-26-18  
Signed: Jim Geertges

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: Mage, Jason SSG Date:  
Signed: R

E-Mail:

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

SITE AND BLDG #: WU053-01LOCATION/RM #: 15C WO# 6558 ASSET # 5016MECHANIC  
SIGNATURE: DATE: 12/26/18START TIME: 9:55FINISH TIME: 10:10

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETED		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		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.	<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Examine exterior of tank including fittings, manholes, and handholes for leaks, signs of corrosion, and correct as indicated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Clean, test and inspect sight glasses, valves, fittings, drains, and controls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Clean up work site.	<input checked="" type="checkbox"/>	<input 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 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: