

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

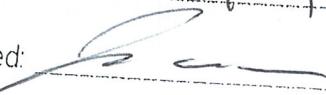
To be signed by the Contractor:

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 Lazzus
2. Jim Geertges
3. Scott Harry
4. JKrankle 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
VEHICLE EXHAUST REMOVAL

SITE AND BLDG #: WU 053 - 02

LOCATION/RM #: Bays WO# 6825 ASSET # 8033

MECHANIC
SIGNATURE:

START TIME:

DATE: 12/26/18

FINISH TIME: 945

CHECK ITEM#	CHECKPOINT DESCRIPTION	SPECIAL INSTRUCTIONS	BASIC EQUIPMENT		NOTES/ACTIONS (0=DONE/1=IN PROGRESS/2=NOT PROVIDED)
			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.				
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	Start and stop fan with local switch				
2	Check motor and fan shaft bearings for noise, vibration, overheating; lubricate bearings.				
3	Inspect, adjust belts and pulleys. Replace belt as needed.				
4	Clean dampers; lubricate pivot points (annually) and inspect linkages for tightness.				
5	Inspect fan for bent blades, unbalance, excessive noise and vibration.				
6	Clean fan as needed.				
7	Visually inspect exhaust system tubing and/or duct work for any damage that could result in leaks.				
8	Repair as needed				

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:

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PC