<div align="center">

CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE

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

</div>

FACID/Building: __NY013_____ Date of Visit: __2/16/22_____

Contractor Personnel on Site:

1. ___PATRICK BROWN___   3. _____

2. _____   4. _____

Work Performed:

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

1. WO#'S , 15945 , 15946 , 16119-16125 , 16238 , 16252 , 16267 ,
2. 15968 , 16126-16128
3. ASSET#S , 9218-9220 , 9222 , 9240 , 9241 , 9243 , 9244 , 9245 ,
4. 9254 , 9261 , 9262 , 9263 , 190917, 131 , 102 , 103 , 132 , 119 , 124 ,
5. 125 , 126

<div align="center">

CERTIFICATION OF WORK

</div>

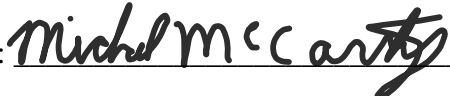To be signed by the Contractor:

Print Name: __Patrick Brown_____ Date: __2/16/22_____

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: ____MR MCCARTHY_____ Date:__2/16/22_____

Signed: _Michal McCarthy_____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
EMERGENCY EXIT SIGNS AND WALL PACKS

ACTIVITY AND BLDG #: NY013 BLDG2

MECHANIC SIGNATURE:

DATE: 2/16/22

LOCATION/RM #: BLDG2   **WO#** 16127, 16128   **ASSET #** 9262 9263

START TIME: 3pm

FINISH TIME: 3:15pm

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES	TASK COMPLETE NO	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
	TO BE PERFORMED AT EACH INSPECTION SERVICE			
1	Inspect for structural defects, note needed repairs	✓		no structural defects
2	Push test buttons and observe light operation. Note any units that do not operate properly.- Report issues and open a CM ticket	✓		units function properly
3	Clean exterior with dry cloth.	✓		units have been wiped down
4	For Exit lights check for proper arrow direction.	✓		Arrow directions are proper
5	Make and/or recommend any needed repairs.	✓		no repairs 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 discription of the deficiency.

To be perfomed by: General Maintenance Worker

Additional Notes: