

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY127 Date of Visit: 11/7/22

Contractor Personnel on Site:

1. Patrick Brown 3. _____
2. _____ 4. _____

Work Performed:

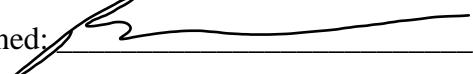
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. WO#'S , 19513 , 19722 , 19727 , 19514 , 19708 , 19723 ,
2. 19728 , 19515 , 19729
3. ASSET#'S , IL-, 65,66,67 , 190917-,
4. 603,622-627,642,645,651,652,659,660,686,682,724,703,707,
5. 710,711,714,716,727,731

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: PATRICK BROWN Date: 11/7/22

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: O'Connor, Timothy SSG Date: 10/28/07

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
EMERGENCY EXIT SIGNS AND WALL PACKS

ACTIVITY AND BLDG #: NY127 BLDG1&2MECHANIC
SIGNATURE: DATE: 11/7/22

LOCATION/RM #: BLDG1&2 WO# 19722, ASSET # 190917-
19723 686,714

START TIME: 11amFINISH TIME: 11:30am

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

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: