

CERTIFICATION OF WORK

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

FACID/Building: PA 013

Date of Visit: 2/1/19

Contractor Personnel on Site:

1. Tony Lazzari

2. Jim Czerigan

3. _____

4. _____

5. _____

6. _____

Work Performed:

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

1. 7398

2. _____

3. _____

4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Czerigan

Date: 2-1-19

Signed: [Signature]

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: NT- Sgt

Date: 2-1-19

Signed: [Signature]

E-Mail: _____

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

FACID/Building: PA013-01

Date of Visit: 2/1/19

Contractor Personnel on Site:

1. Tony Green
2. Jim Gertrude
3. _____

4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 7312
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Gertrude Date: 2-1-19

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: Nicholas Smith Date: 2-1-19

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #:

Pc 013-01

MECHANIC

SIGNATURE:

DATE:

2/1/18

LOCATION/RM #:

Pc 013-01

WO#

7312

ASSET #

7433

START TIME:

700

FINISH TIME:

730

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
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.		/	
2	Schedule and coordinate work with operating personnel.		/	
3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.		/	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Open and tag switch.	/		
2	Inspect visual condition of wiring. Look for evidence of overheating.	/		
3	Check for proper light operation.	/		
4	Test operation of automatic switches/ time clock/ photocells if applicable.	/		
5	Inspect light pole and mounting devices for deficiencies.	/		
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	/		

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:

1 Pc 3 11/11/18

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
LIGHTING, OUTSIDE

SITE AND BLDG #:

PA 013-01

MECHANIC

SIGNATURE: *[Signature]*

DATE:

2/1/19

LOCATION/RM #:

MEP

WO#

7312

ASSET #

7437

START TIME:

730

FINISH TIME:

745

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
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.		/	
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To be performed by: General Maintenance Worker

Additional Notes:

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PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #:

P013-01

MECHANIC

SIGNATURE:

DATE:

2/1/19

LOCATION/RM #:

P013-01

WO#

7312

ASSET #

7475

START TIME:

730

FINISH TIME:

740

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES / ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
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.		/	
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To be performed by: General Maintenance Worker

Additional Notes:

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