

CERTIFICATION OF WORK

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

FACID/Building: P067

Date of Visit: 2/21/19

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Tony Luzzo</u> | 4. _____ |
| 2. <u>Jim Geertgens</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

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

- | | |
|----------------|-------|
| 1. <u>7376</u> | _____ |
| 2. <u>7417</u> | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens

Date: 2-21-19

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: SSG Jordan

Date: 21 FEB 19

Signed: [Signature]

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

FACID/Building: P. 067 Date of Visit: 2/21/19

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Tony Gross</u> | 4. _____ |
| 2. <u>Jim Goertgens</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

Other Recurring Services

- | | |
|----------------|-------|
| 1. <u>7307</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Goertgens Date: 2-21-19

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: SSG J. J. Gorman Date: 21 FEB 19

Signed: [Signature]

E-Mail: _____

CERTIFICATION OF WORK

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

FACID/Building: P 067 - 02

Date of Visit: 2/21/19

Contractor Personnel on Site:

- | | |
|------------------------|----------|
| 1. <u>Tony Green,</u> | 4. _____ |
| 2. <u>Jim Geertgen</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

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

- | |
|--|
| 1. <u>Changed F.I.L.s on MUA-2 ASSE 3422</u> |
| 2. _____ |
| 3. _____ |
| 4. _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgen Date: 2-21-19

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: [Signature] Date: 24 FEB 19

Signed: [Signature]

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #:

PA 067-01

MECHANIC

SIGNATURE: *[Signature]*

DATE:

2/21/11

LOCATION/RM #:

None

WO# 7307

ASSET # 742r

START TIME: 0615

FINISH TIME: 0630

CHECKS PERFORM	DESCRIPTION	BASIC COMPLIANCE		NOTES/ACTIONS
		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.		✓	
WORK PERFORMED AT EACH INSPECTION DATE				
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.	N/A		

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:

i Pc

CMI Management Inc.

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #:

Pp 067-01

LOCATION/RM #:

MEL

WO#

7307

ASSET # 7462

MECHANIC

SIGNATURE: Tony E

DATE:

2/21/12

START TIME:

0630

FINISH TIME:

0650

CHECKS PROJECT	DESCRIPTION/INSTRUCTIONS	BASIS OF COMPLIANCE		NOTES/ACTIONS
		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:

5

PC

2 Poles Back Left R. Net Work

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST GATES, FENCES, SECURITY AND ACCESS

SITE AND BLDG #:

PA 067-01

LOCATION/IRM #:

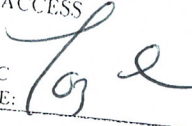
M-1

WO#

7357

ASSET #

7856

MECHANIC
SIGNATURE:


START TIME:

074

DATE:

2/21/19

FINISH TIME:

0800

ITEM NO.	DESCRIPTION	STATUS		REMARKS
		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	Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.	✓		
3	Check all locking devices. Lubricate as required.	✓		
4	Inspect center gate support rollers and lubricate as required.	✓		
5	Clean roller track of any debris.	✓		
6	Check bolts, fasteners, and mounting hardware. Tighten or adjust as necessary.	✓		
7	Check for any obstructions that retard full swing or movement of the gate.	✓		
8	Check that shrubs and trees are pruned clear of gate.	✓		
1	Check hold open devices for proper operation. Lubricate as required.	✓		
2	Check posts and corner posts, support guys, and horizontal bars between each support post.	✓		
3	Check wire and anchor point, re-stretch and re-anchor if necessary.			
4	Inspect fence anchors along the bottom of the fence and at the point where the fence is connected to the post.			
5	Treat with galvanized protectant where rust has developed.			
6	If approved, apply weed control along entire base of fence. Consult the Safety Data Sheets (SDS) for hazardous ingredients and proper personal protective equipment (PPE).			
7	Check that shrubs and trees are pruned clear of fencing.			

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: