

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 9/26/22

Contractor Personnel on Site:

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

Work Performed:

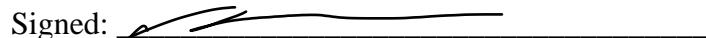
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. WO#'S , 18740 , 18795 , 18796 , 18851-18855 , 18908 , 18974 ,
2. 18995 , 18896 , 19074-19078 , 19151 , 19159 , 19183 , 18797 ,
3. 18975 , 18997 , 18976 ,
4. ASSET#'S , 10564 , 10565 , 10547-10550 , 10558 , 10612 ,
5. 10610 , 10615 , 10628 , 10641 , 190917-, 423 , 424 , 427 , 428 ,
- 420 , 450 , 422 , IL-, 55 , 56 , 57

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 9/26/22

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: Amelia MVR FC8 Date: 9/26/22

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FILTER REPLACEMENT

SITE AND BLDG #: **NY067 BLDG1**MECHANIC
SIGNATURE: DATE: **9/26/22**LOCATION/RM #: **BLDG1** WO# **18851-18855**START TIME: **9am**FINISH TIME: **10am**

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	Check, clean, and/or replace filters as required.	✓	/			
2	Initial and Date Filter (if disposable)	✓	/			
3	Initial and Date Yellow Maintenance Tag (if applicable)	✓	/			
ASSET #	SIZE	QTY	NOTES/ ACTIONS			
Record Size :						
10547	20x20x2 - 20x24x2	6-9				
10548	20x24x2	6				
10549	12x24x2 - 24x24x2	3-3				
10550	20x20x2-24x20x2-12x24x2	6-2-3				
10558	20x20x2	6				
NOTE : Any AHU with outside air -Filter gets replaced Quarterly						
All other filters get replaced annually But inspected Quarterly						

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 Technician

Additional Notes: