

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 4/6/23

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 , 21535 , 21536 , 21537 , 21612 , 21675 , 21699 , 21700 ,
2. 21709 , 21723 , 21538 , 21539 , 21540 , 21599 , 21676 , 21701 ,
3. 21724 , 21677 , 21725
4. ASSET#'S , 10561 , 10562 , 10563 , 10612 , 10626 , 10627 ,
5. 10629 , 190917-, 435,436,437,453,450,421,456,454,461 , IL-55 ,
IL-56 , IL-57

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 4/6/23

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: Noah Ingerson Date: 4/6/23

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
INTERIOR LIGHTING

ACTIVITY AND BLDG #: **NY067 BLDG3**MECHANIC
SIGNATURE: DATE: **4/6/23**LOCATION/RM #: **BLDG3** WO# **21677**, ASSET # **IL-57**,
21725 190917-461START TIME: **11:30am**FINISH TIME: **12pm**

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	Visually check all accessible areas for burned out bulbs and/or flickering lights. Check with the facility manager to see if they know of any outages.	✓		
2	Replace bulbs where applicable. Note quantity of bulbs replaced. If lift is required, schedule accordingly.	✓		
3	Test light fixture. If light does not work, replace starters and/or ballasts as necessary.	✓		
4	Note and report any needed electrical repairs.	✓		
5	Properly dispose of any non-working bulbs and ballasts.	✓		
6	Clean up area and remove any trash.	✓		

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: