

CERTIFICATION OF WORK

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

FACID/Building: PA 050 Date of Visit: 1/10/19

Contractor Personnel on Site:

- |                         |                          |
|-------------------------|--------------------------|
| 1. <u>Tony Lopez</u>    | 4. <u>Frank Sapienza</u> |
| 2. <u>Jim Geertgens</u> | 5. _____                 |
| 3. <u>Scott Werry</u>   | 6. _____                 |

Work Performed:

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

1. 7012
2. 7058
3. \_\_\_\_\_
4. \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens Date: 1-10-19

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: Steve Dand Date: 20190116

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: Pa 050

Date of Visit: 1/10/19

Contractor Personnel on Site:

1. Tony Lanza  
2. Jim Geertgens  
3. Scott Werny

4. Karla Spier  
5. \_\_\_\_\_  
6. \_\_\_\_\_

Work Performed:

Other Recurring Services

1. 6924  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens

Date: 1-10-19

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: Steve Davis

Date: 20190110

Signed: [Signature]

E-Mail: \_\_\_\_\_

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**LIGHTING, OUTSIDE**

SITE AND BLDG #:

PA 050-01

MECHANIC  
SIGNATURE:*John A. Smith*

DATE:

2-2-19

LOCATION/RM #:

PKG  
LOT

WO#

6924

ASSET #

7967

START TIME:

5:10 PM

FINISH TIME:

5:15 PM

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
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.		✓	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
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:

6 PC DOUBLE LITE POLE MOUNT ALUM LED  
PHOTOCELL CONTACTS

\* 1 DOUBLE BEHIND MOTOR POOL HAS  
RIGHT LAMP OUT,

\* 1 DOUBLE BEHIND MAIN BLDG'S RIGHT  
CORNER HAS  
LEFT LAMP OUT