

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY051 BLDG1 Date of Visit: 1/6/22

Contractor Personnel on Site:

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

**Work Performed:**

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

1. WO#'S , 15731 , 15732 , 15753 , 15754 , 15850 , 15862 , 15872 , 15755 , 15863
  2. ASSET#'S , 10066 , 10069-10071 , 10078 , 190917- , 294 , 299 , 277 , 285 , 302
  3. \_\_\_\_\_
  4. \_\_\_\_\_
  5. \_\_\_\_\_
- 

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1/6/21

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: SFC ERIC ABBOTT Date: 1/6/21

Signed: 

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

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

SITE AND BLDG #: NY051

MOV PARKING

LOCATION/RM #: WO# 15731, ASSET # 10066  
15850

190917-294

MECHANIC  
SIGNATURE: 

DATE: 1/6/22

START TIME: 7am

FINISH TIME: 7:30am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Schedule and coordinate work with operating personnel.	/	/	
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.	/	/	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Inspect lighting contactor for pitting or arcing - report issues	✓	/	no pitting or arcing
2	Inspect visual condition of wiring. Look for evidence of overheating.	✓	/	no evidence of overheating
3	Check for proper light operation.	✓	/	lights function properly
4	Test operation of automatic switches/ time clock/ photocells if applicable.	✓	/	all function properly
5	Inspect light pole and mounting devices for deficiencies.	✓	/	light pole and mounting are good
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	✓	/	no noted deficiency

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:**