

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

FACID/Building: Gaithersburg MD013 Date of Visit: 5/20/19

Contractor Personnel on Site:

1. Patrick Donovan 2. \_\_\_\_\_

**Work Performed:**

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

1. 8485, 8515, 8546, 8516, 8547,

**Service Calls** – Service Call Number and Description

1. CSS# \_\_\_\_\_
2. CSS# \_\_\_\_\_
3. CSS# \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

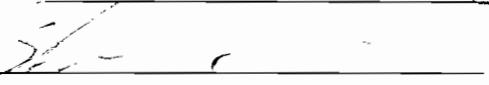
Print Name: Patrick Donovan Date: 5/20/19

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: ARIA S. LANKA Date: 5/20/19

Signed: 

E-Mail: aria.lanka@usgs.gov

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

## FILTER REPLACEMENT

SITE AND BLDG #: Gatherings #D013

MECHANIC  
SIGNATURE

DATE: 5/20/19

LOCATION/RM #: Hegeman WO# 8846

START TIME: 10:00

FINISH TIME: 10:45

1	Check, clean, and/or replace filters as required.	<input checked="" type="checkbox"/>
2	Initial and Date Filter (if disposables)	<input checked="" type="checkbox"/>
3	Initial and Date Yellow Maintenance Tag (if applicable)	<input checked="" type="checkbox"/>
4		

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  
exceeding \$250 open a corrective maintenance (CM) ticket.

### Additional Notes: