

## CERTIFICATION OF WORK

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

FACID/Building: Gaithersburg MD013 Date of Visit: 5/6/19

Contractor Personnel on Site:

1. Patrick Donovan

2.

### Work Performed:

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

1. 9642, 10048, 9643, Air Handlers filters, Water heaters & furnace

### Service Calls – Service Call Number and Description

1. CSS#

2. CSS#

3. CSS#

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Donovan Date: 5/6/19

Signed: Patrick Donovan

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: TARA ST LAURENT GS11 Date: 5/6/19

Signed: Tara St Laurent

E-Mail: Tara.f.St.Laurent.CIV@mail.mil

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

## FILTER REPLACEMENT

SITE AND BLDG #: Gaithersburg, MD 20878

LOCATION/RM #: Mechanical 1500 WO# 9642

MECHANIC  
SIGNATURE

DATE: 8/5

Task	Description	Initial	Date Filter	Maintenance Tag
1	Check, clean, and/or replace filters as required.	<input checked="" type="checkbox"/>		None / replaced Filters
2	Initial and Date Filter (if disposable)	<input checked="" type="checkbox"/>		None
3	Initial and Date Yellow Maintenance Tag (if applicable)			None
1988	16X20X4			
outside unit	20x25x2			
		5		Changed filters

Note: The technician shall perform any repairs identified during PM1 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:**