

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

FACID Building: *Upper Marlboro MD016* Date of Visit: *2/4/19 - 2/5/19*

Contractor Personnel on Site:

1. *Patrick Donovan*

4.

5.

5.

6.

6.

Work Performed:

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

5. LIST WORK: *7197, 7232, 7212*

6. *Annual backflow certification, Freezer, Water Heater,*
7. *Sump pump, Flood lights*

8.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: *Patrick Donovan*

Date: *2/5/19*

Signed: *[Signature]*

To be signed by Facility Manager or Government Official

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name Rank: *Parker, Richard L CTR*

Date: *20190205*

Signed: *[Signature]*

E-Mail: *richard.l.parker@mar.mil*

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **LIGHTING, OUTSIDE**

SITE AND BLDG #: Upper Marlboro MD 2016
 LOCATION/RM #: Blk #2 WO# 7212 ASSET # 1457

MECHANIC SIGNATURE: [Signature] DATE: 2/4/19
 START TIME: 11:00 FINISH TIME: 11:20

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS <small>(IF TASK CANNOT BE COMPLETED, PROVIDE EXPLANATION)</small>
		YES	NO	
SPECIAL INSTRUCTIONS				
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.	<input checked="" type="checkbox"/>		Signed + dated Maint. Record Log
2	Schedule and coordinate work with operating personnel.	<input checked="" type="checkbox"/>		
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.	<input checked="" type="checkbox"/>		
FOR PERSONNEL AT THE INSPECTION SERVICE				
1	Open and tag switch.	<input checked="" type="checkbox"/>		done
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>		good
3	Check for proper light operation.	<input checked="" type="checkbox"/>		good
4	Test operation of automatic switches/ <u>time clock</u> photocells if applicable.	<input checked="" type="checkbox"/>		good
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>		good
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>		done

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: