

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

FAC ID Building: Upper Marlboro MD016 Date of Visit: 1/15/19

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 WO# 7113, 7114 + ~~7085~~ 7085  
6. Manual gates, Circulating pumps, Overhead doors  
7. Flood lights  
8.

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Patrick Donovan

Print Name

Date:

1/15/19

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: Patrick, Richard C

Date: 2-19-18

Signed

[Signature]

E-Mail

richard.c.parker@usmc.mil

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #: Upper Marlboro MD 2016

MECHANIC SIGNATURE: [Signature]

DATE: 1/15/19

LOCATION/RM #: King Bldg 2 WO# 7085 ASSET # 1457

START TIME: 1:35

FINISH TIME: 1:50

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETION		NOTES/ ACTIONS (If recommended checked no further explanation)
		YES	NO	
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"/>		<u>Signal related Maint Record Tag</u>
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"/>		
TO BE PERFORMED AT EACH INSPECTION INTERVAL				
1	Open and tag switch.	<input checked="" type="checkbox"/>		<u>done</u>
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>		<u>good</u>
3	Check for proper light operation.	<input checked="" type="checkbox"/>		<u>done / good</u>
4	Test operation of automatic switches (time clock) photocells if applicable.	<input checked="" type="checkbox"/>		<u>good</u>
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>		<u>good</u>
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>		<u>done</u>

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: