

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

FACID/Building: Riverdale
MD020 Date of Visit: 5/23/19

Contractor Personnel on Site:

1. Patrick Donovan 2.

Work Performed:

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

1. 8489, 8520, 8551,

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: 5/23/19

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: NRIGUEZ REIGUEZ Date: 5/23/19

Signed: NRIGUEZ REIGUEZ

E-Mail: NRIGUEZ.REIGUEZ@USAF.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FILTER REPLACEMENT

SITE AND BLDG #: *Riverdale MD2020* MECHANIC SIGNATURE: *John* DATE: *5/23/19*
LOCATION/RM #: *Prk* WO# *8551* START TIME: *11:50* FINISH TIME: *12:55*

Task	Completed	Notes
1 Check, clean, and/or replace filters as required.	✓	Done
2 Initial and Date Filter (if disposable)	✓	Done
3 Initial and Date Yellow Maintenance Tag (if applicable)		
2067	20x20x2	3
2068	20x20x2	3
2069	20x20x2	3
2070	20x20x2	3

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
Additional Notes: