

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

FAC ID Building: MDO20 Riverdale Date of Visit: 1/11/19

Contractor Personnel on Site:

1. Patrick Donovan

4.

5.

5.

6.

6.

**Work Performed:**

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

1. LIST WO# 7117 + 7118

2. Gates + overhead doors + filters

3.

8.

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Donovan

Date: 1/11/19

Signed: 

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: Williams, David Date: 1/11/19

Signed: 

E-Mail: david.c.williams2.mil@mail.mil

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST GATES, FENCES, SECURITY AND ACCESS

SITE AND BLDG #: Riverview MD200

MECHANIC SIGNATURE: [Signature] DATE: 11/01/19

LOCATION/RM #: Exterior WO# 7117 ASSET # Sec Notes

START TIME: 9:30 FINISH TIME: 11:00

CHECK POINT	CHECK POINT DESCRIPTION	TASK COMPLETE		NOTES / ACTIONS (REPAIRS, SUPPLIES, ETC. REQUIRED, PROVIDE 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.	<input checked="" type="checkbox"/>		
2	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				
1	Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.	<input checked="" type="checkbox"/>		Good
2	Check all locking devices. Lubricate as required.	<input checked="" type="checkbox"/>		
3	Inspect center gate support rollers and lubricate as required.			N/A Swing Gates
4	Clean roller track of any debris.			N/A Swing Gates
5	Check bolts, fasteners, and mounting hardware. Tighten or adjust as necessary.	<input checked="" type="checkbox"/>		Good
6	Check for any obstructions that retard full swing or movement of the gate.	<input checked="" type="checkbox"/>		Good
7	Check that shrubs and trees are pruned clear of gate.	<input checked="" type="checkbox"/>		Good
8	Check hold open devices for proper operation. Lubricate as required.			N/A No hold open devices located

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETELY CHECKED, NO PROVIDED EXPLANATION)
		YES	NO	
1	Check posts and corner posts, support guys, and horizontal bars between each support post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Good
2	Check wire and anchor point; re-stretch and re-anchor if necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Good
3	Inspect fence anchors along the bottom of the fence and at the point where the fence is connected to the post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	all good
4	Treat with galvanized protectant where rust has developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	checked. No rust visible
5	If approved, apply weed control along entire base of fence. Consult the Safety Data Sheets (SDS) for hazardous ingredients and proper personal protective equipment (PPE).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Good
6	Check that shrubs and trees are pruned clear of fencing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Good

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:

Asset #

2084 ✓

2085 ✓

2086 ✓

2087 ✓

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST MANUAL/AUTOMATIC OVERHEAD DOORS

SITE AND BLDG #: Riverside WDO20MECHANIC SIGNATURE: [Signature]DATE: 1/10/19LOCATION/RM #: Drill Hall + Kitchen WO# 7117 ASSET # Sec NotesSTART TIME: 11:30FINISH TIME: 12:15

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	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"/>	<input type="checkbox"/>	<u>Signed &amp; dated Maint. Record</u>
1	Check with door operating personnel for any known deficiencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>good</u>
2	Inspect general arrangement of door and mechanism, mountings, standards, wind locks, anchor bolts, counterbalances, weather stripping, door sweeps etc. Clean, tighten, and adjust repair as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>good</u>
3	If applicable, operate with power from start to stop and at intermediate positions. Observe performance of various components, such as brake, limit switches, door operating speed, motor, gear box, etc. Clean and adjust as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>good</u>
4	Check operation of safety edges, stops, electric eye, treadle, or other operating devices. Clean and make required adjustments or repairs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>1/4 No Safety devices located</u>
5	Check manual operation. Note brake release, motor disengagement, functioning or hand pulls, chains sprockets, clutch, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Good</u>
6	If applicable, examine all wiring, motor, starter, push button, etc., blow out or vacuum if needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Good</u>
7	If applicable, inspect gear box, change or add oil as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>done</u>
8	Perform required lubrication. Remove old or excess lubricant.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>done</u>
9	Clean unit and mechanism thoroughly. Touch up paint where required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>done</u>
10	Clean up and remove all debris.	<input checked="" type="checkbox"/>	<input 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

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Additional Notes: Asset# 2088 Drill Hall#2090 Kitchen#2089 Kitchen