

CERTIFICATION OF WORK

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

FACID/Building: Rockville MD021 Date of Visit: 7/11/19

Contractor Personnel on Site:

1. Patrick Donovan 2. \_\_\_\_\_

Work Performed:

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

1. 9055, 9548, 9056, 9549, 9550  
Air Compressor, Overhead doors, Gates, Fences

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: 7/11/19  
Signed: [Signature]

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: Sgt Bryon, Jason Date: 20190711  
Signed: [Signature]  
E-Mail: \_\_\_\_\_

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

SITE AND BLDG #: Rockville 412021MECHANIC SIGNATURE: [Signature]DATE: 7/10/19LOCATION/RM #: Remaster WO# 9055 ASSET # See NotesSTART TIME: 10:25FINISH TIME: 11:10

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"/>	
TO BE COMPLETED BY INSPECTION SERVICE				
GATES				
1	Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Fence P.M.</u>
2	Check all locking devices. Lubricate as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>" " "</u>
3	Inspect center gate support rollers and lubricate as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>" " "</u>
4	Clean roller track of any debris.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>" " "</u>
5	Check bolts, fasteners, and mounting hardware. Tighten or adjust as necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>" " "</u>
6	Check for any obstructions that retard full swing or movement of the gate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>" " "</u>
7	Check that shrubs and trees are pruned clear of gate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>" " "</u>
8	Check hold open devices for proper operation. Lubricate as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>" " "</u>

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
1	Check posts and corner posts, support guys, and horizontal bars between each support post.	<input checked="" type="checkbox"/>		<i>all good</i>
2	Check wire and anchor point; re-stretch and re-anchor if necessary.	<input checked="" type="checkbox"/>		<i>good</i>
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"/>		<i>done/good</i>
4	Treat with galvanized protectant where rust has developed.	<input checked="" type="checkbox"/>		<i>no rust seen</i>
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"/>		<i>weeds are clear</i>
6	Check that shrubs and trees are pruned clear of fencing	<input checked="" type="checkbox"/>		<i>all clear</i>

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# 1276 ✓  
 1277 ✓  
 1278 ✓