

CERTIFICATION OF WORK

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

FACID/Building: White Plains Date of Visit: 12/20/19

Contractor Personnel on Site:

1. Patrick Donovan 2. _____

Work Performed:

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

1. 11381, 11383, 11390, 11391, 11394, 11399 Filter, Lights, Vent Heater
Vehicle Exhaust, Lightning Rods, Ceiling Tower

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: 12/20/19

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: Martinez Diaz Rodriguez CPT Date: 20191220

Signed: [Signature]

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #: White Plains 110066

MECHANIC SIGNATURE: [Signature]

DATE: 12/11/19

LOCATION/RM #: Exterior second Bldg not WO# 11390 ASSET # note

START TIME: 9:30

FINISH TIME: 9:55

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
1	Schedule and coordinate work with operating personnel.	<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"/>	
1	Inspect lighting contactor for pitting or arcing -report issues	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>all good</u>
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>done / all good</u>
3	Check for proper light operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Test operation of automatic switches/ time clock/ photocells if applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>all good</u>
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>noted. All is good</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:

Asset# 367 ✓
368 ✓
369 ✓
370 ✓

Asset# 371 -
372 ✓
373 ✓
374 ✓