

CERTIFICATION OF WORK

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

FACID/Building: *White Plains* Date of Visit: *1/24/2020*
AD066

Contractor Personnel on Site:

1. *Patrick Donovan* 2.

Work Performed:

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

1. *11529, 11530, 11531, 11533, 11535*

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: *1/24/2020*

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: *SFC WILLIAMS, D*

Date: *24 Jan 20*

Signed: *[Signature]*

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

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **PLUMBING FIXTURES**

SITE AND BLDG #: White Plains
 LOCATION/RM #: 045 #1 WO# 11529 ASSET # AD66-327

MECHANIC SIGNATURE: [Signature] DATE: 1/22/2020
 START TIME: 9:00 FINISH TIME: 9:15

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETION		NOTES/ ACTIONS
		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"/>		
1	SINKS - Operate faucets, inspect for leaks, replace washers/"O" rings as necessary. Observe drain flow, clean trap if obstructed. Replace filter as needed.		<u>N/A</u>	
2	SHOWER HEADS, MIXING VALVES - Check shower for damaged, missing, or leaking heads; replace as required. Check mixing valves for damaged or missing parts; replace washers as needed.		<u>N/A</u>	
3	SHOWER STALLS - Check for leaks, cracks, significant wear or vandalism.		<u>N/A</u>	
4	TOILETS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps, seat supports, and replace.		<u>N/A</u>	
5	URINALS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps and replace.		<u>N/A</u>	
6	OTHER MISCELLANEOUS FIXTURES - Clean and inspect for any damage. Check for leaks, missing or damaged parts, caps, etc. Replace as needed.	<input checked="" type="checkbox"/>		<u>Eye wash station No leaks detected</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:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST PLUMBING FIXTURES

SITE AND BLDG #: White Plains 47066
LOCATION/RM #: Sec 104 WO# 11529 ASSET #

MECHANIC SIGNATURE: [Signature] DATE: 1/29/2020
START TIME: 8:30 FINISH TIME: 11:00

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETION		NOTES/ACTIONS
		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"/>		
1	SINKS - Operate faucets; inspect for leaks; replace washers/"O" rings as necessary. Observe drain flow; clean trap if obstructed. Replace filter as needed.		<u>N/A</u>	
2	SHOWER HEADS, MIXING VALVES - Check shower for damaged, missing, or leaking heads; replace as required. Check mixing valves for damaged or missing parts; replace washers as needed.		<u>N/A</u>	
3	SHOWER STALLS - Check for leaks, cracks, significant wear or vandalism.		<u>N/A</u>	
4	TOILETS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps, seat supports, and replace.		<u>N/A</u>	
5	URINALS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps and replace.		<u>N/A</u>	
6	OTHER MISCELLANEOUS FIXTURES - Clean and inspect for any damage. Check for leaks, missing or damaged parts, caps, etc. Replace as needed.	<input checked="" type="checkbox"/>		<u>No leaks on any valves/all ok</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# 173 Mech Rm ✓
174 Mech Rm ✓
175 Mech Rm ✓
189 Mech Rm ✓
190 Mech Rm ✓

Asset# 328 OMS#1 ✓
329 OMS#2 ✓

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST EXPANSION TANKS

SITE AND BLDG #: White House MD066MECHANIC SIGNATURE: DATE: 1/15/2020LOCATION/RM #: Mechanical Room WO# 11529 ASSET # MD6-184 + 185START TIME: 9:15FINISH TIME: 9:35

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO. PROVIDE EXPLANATION)
		YES	NO	
1	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	Examine exterior of tank including fittings and valves for leaks, signs of corrosion, and correct as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Done / no leaks detected</u>
2	Insure level is between 1/2 and 3/4 sight glass. Correct as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Done / OK</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 183 ✓
184 ✓
185 ✓

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST CHEMICAL BYPASS/POT FEEDER

SITE AND BLDG #: White Plains MD 2066MECHANIC SIGNATURE: DATE: 1/15/2020LOCATION/RM #: Mechanical Room WO# 11529 ASSET # MD66-177-193START TIME: 8:25FINISH TIME: 8:40

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
1	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>Done</u>
1	Check physical condition of feeder. Clean and/or repair as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Done</u>
2	Check valves for proper operation. Ensure no leaks are present and repair as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Done</u>

Note: The technician shall perform any repairs identified during P.M up to \$250 (direct labor and direct material cost) per P.M 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 # 177 ✓

193 ✓

194 ✓

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST PLUMBING FIXTURES

SITE AND BLDG #: White Plains MD066

MECHANIC SIGNATURE: 

DATE: 11/4/2020

LOCATION/RM #: Vanous' location WO# 11529 ASSET # MD066-374
in All Bldgs

START TIME: 8:20

FINISH TIME: 1:30

CHECKLIST DESCRIPTION		TICKET NUMBER		NOTES	
SPECIAL INSTRUCTIONS		SPECIAL INSTRUCTIONS		SPECIAL INSTRUCTIONS	
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"/>			
1	SINKS - Operate faucets, inspect for leaks, replace washers/"O" rings as necessary. Observe drain flow, clean trap if obstructed. Replace filter as needed.	<input checked="" type="checkbox"/>			<u>all sinks + faucets checked. All are good</u>
2	SHOWER HEADS, MIXING VALVES - Check shower for damaged, missing, or leaking heads; replace as required. Check mixing valves for damaged or missing parts; replace washers as needed.	<input checked="" type="checkbox"/>			<u>found 1 broken shower hose in mens locker room. ordered new one. Done / all good</u>
3	SHOWER STALLS - Check for leaks, cracks, significant wear or vandalism.	<input checked="" type="checkbox"/>			<u>Done / good</u>
4	TOILETS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps, seat supports, and replace.	<input checked="" type="checkbox"/>			<u>replaced all batteries in auto flushers All good</u>
5	URINALS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps and replace.	<input checked="" type="checkbox"/>			<u>replaced all batteries in auto flushers All good</u>
6	OTHER MISCELLANEOUS FIXTURES - Clean and inspect for any damage. Check for leaks, missing or damaged parts, caps, etc. Replace as needed.	<input checked="" type="checkbox"/>			<u>Checked all sinks in kitchen. All good + waste fountain. replaced all filters in fountain</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: