

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 4/19/23

Contractor Personnel on Site:

1. Andy Hunold 3. _____
2. _____ 4. _____

Work Performed:

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

1. WO#'S 22162, 22349, 22350, 22378, 22379, 22406, 22629, 22630,
2. 22631, 22632, 22633, 22634, 22644, 22653, 22659, 22678, 22407, 22473,
3. 22635, 22679, 22408, 22680
4. ASSET#'S 190917-248, 9891, 9896, 9932, 9935, IL-31, 9893, 9894, 9895,
5. 9896, 9897, 9931, 190917-245, 190917-269, 190917-264, 190917-267,
5. 190917-270, IL-32, 9943, 9939, 190917-274, IL-33, 190917-275

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _____ Date: _____

Signed: _____

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: _____ Date: _____

Signed: _____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
SUMP PUMP

SITE AND BLDG #: NY039-01 Mattydale

**MECHANIC
SIGNATURE:** 

DATE: 6/29/23

LOCATION/RM #: Boiler Rm. **WO#** 22659 **ASSET #** 190917-264

START TIME: 1500

FINISH TIME: 1517

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
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.	X		
2	Excessive sediment and debris, not removed by flushing the pit should be handled on a project basis, and not considered under this standard.	X		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Remove cover plates and flush pit.	X		
2	Inspect check valve.	X		
3	Inspect interior of pit for cracks.	X		
4	Inspect cover plate is in place	X		
5	Insuure the unit is operating properly, report any deficiencies	X		
6	Clean up work area and remove all debris.	X		

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 discription of the deficiency.

To be perfromed by: General Maintenance Worker

Additional Notes: