

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

FACID Building: Upper Marlboro MD016 Date of Visit: 12/20/18

Contractor Personnel on Site:

1. Patrick Donovan

4.

5.

5.

6.

6.

Work Performed:

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

7. LIST WORK: 6794, 6803, 6762, 6781,

8. Hot water pumps, Chilled water pumps, Dual temp. Pumps,
Fan coils, Flood lights, Vehicle exhaust system.

8.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Donovan

Date: 12/20/18

Signed: [Signature]

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: Parker, Richard C SGT Date: 12/20/18

Signed: [Signature]

E-Mail: Richard.C.Parker8.mil@marl.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **LIGHTING, OUTSIDE**

SITE AND BLDG #: Upper Marlboro MD 2016

MECHANIC SIGNATURE: [Signature] DATE: 12/7/18

LOCATION/RM #: Blkg #2 WO# 6762 ASSET # 1457#01-#03 START TIME: 1:00 FINISH TIME: 1:30

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		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 to.	<input checked="" type="checkbox"/>		Signed & dated Maintenance Tech
2	Schedule and coordinate work with operating personnel.	<input checked="" type="checkbox"/>		
3	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 COMPLETED BY INSPECTION SERVICE				
1	Open and tag switch.	<input checked="" type="checkbox"/>		Done
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>		Good
3	Check for proper light operation.	<input checked="" type="checkbox"/>		Good
4	Test operation of automatic switches/ time clock/ photocells if applicable.	<input checked="" type="checkbox"/>		Time clock ok
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>		Good
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>		Done

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: