

CERTIFICATION OF WORK

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

FACID/Building: *Alexandria VA 002* Date of Visit: *1/27/2020*

Contractor Personnel on Site:

1. *Patrick Donovan* 2.

Work Performed:

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

1. *11516, 11484, 11517 Domestic Hot water pump, Overhead doors, Key Card Scanners, Double lights, Manual Gates,*

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: *1/27/2020*

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: *Michael G. Carr Sr.*

Date: *27 Jan 20*

Signed: *[Signature]*

E-Mail: *Michael.G.Carr@mil.mil*

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #: Alexandria 14002MECHANIC SIGNATURE: [Signature]DATE: 1/27/2020LOCATION/ROOM #: Blk #7 King Lot WO# 11481 ASSET # 1461START TIME: 8:15FINISH TIME: 8:30

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"/>		
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"/>		
1	Open and tag switch.	<input checked="" type="checkbox"/>		<u>Done</u>
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>		<u>done</u>
3	Check for proper light operation.	<input checked="" type="checkbox"/>		<u>done</u>
4	Test operation of automatic switches/ time clock/ photocells if applicable.	<input checked="" type="checkbox"/>		<u>Done</u>
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>		<u>done</u>
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>		<u>Done</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: