

CERTIFICATION OF WORK

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

FACID/Building: Alexandria VA002 Date of Visit: 6/27/19

Contractor Personnel on Site:

1. Patrick Donovan 2. _____

Work Performed:

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

1. 8863, 8898, 8946, 8899, 8917, 8940
P-tacs filters, Mini Split filters, Pumps, Exhaust fans, unit heaters, Air Curtains,
Service Calls – Service Call Number and Description Pkg. lot lights.

1. CSS# _____
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Donovan Date: 6/27/19

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: Selina Dibella / SGT Date: 20190627

Signed: [Signature]

E-Mail: selina.a.dibella.mil@mail.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST LIGHTING, OUTSIDE

SITE AND BLDG #:

Alexandria 14002

MECHANIC
SIGNATURE:

[Signature]

DATE:

6/25/15

LOCATION/RM #:

*Bldg # 3
Rm # 101*

WO#

8917

ASSET #

1461

START TIME:

11:10

FINISH TIME:

11:30

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

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:

*Signed & dated Maintenance
Record Tag*