

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY051 Date of Visit: 10/5/20

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Patrick Brown</u> | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

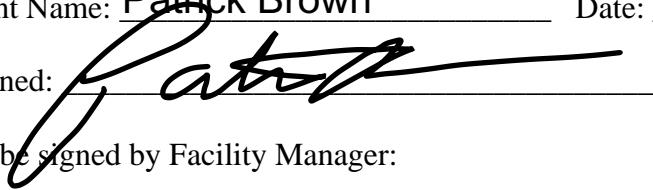
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. WO'S 9780AN, 9834-9837CAN,9909-9910FQT, 9988-9989MO, 10047-10049SA
 2. 10192PMA,10201PMM,1220PMS, 9911-9912FQT, 1006QT, 10050-10051SA
 3. 10016QT, 10050-10051SA
 4. _____
 5. _____
-

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 10/5/20

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: SFC PATRIC HANLON Date: 10/5/20

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
LIGHTING, OUTSIDE

SITE AND BLDG #: **NY051-01**MECHANIC
SIGNATURE: DATE: **10/5/20**

LOCATION/RM #: **WO# 9988 ASSET # 10066**
10201 190917-294

START TIME: **6:30am**FINISH TIME: **7am**

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|---|--|---------------|----|---|
| | | YES | NO | |
| 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 to. | ✓ | / | |
| 2 | Schedule and coordinate work with operating personnel. | ✓ | / | |
| 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. | ✓ | / | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 1 | Open and tag switch. | ✓ | / | |
| 2 | Inspect visual condition of wiring. Look for evidence of overheating. | ✓ | / | no evidence of overheating |
| 3 | Check for proper light operation. | ✓ | / | lights function properly |
| 4 | Test operation of automatic switches/ time clock/ photocells if applicable. | ✓ | / | all function properly |
| 5 | Inspect light pole and mounting devices for deficiencies. | ✓ | / | light pole mounting is good |
| 6 | For any noted deficiency, takes pictures and open corrective maintenance ticket. | ✓ | / | no deficiencies noted |

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
GATES

SITE AND BLDG #: **NY051-01**MECHANIC
SIGNATUREDATE: **10/5/20**

LOCATION/RM #: **WO# 9989** **ASSET # 10069**
10201 **190917-299**

START TIME: **9am**FINISH TIME: **9:30am**

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|---|---|---------------|----|---|
| | | YES | NO | |
| 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. | ✓ | / | |
| 2 | Review manufacturer's instructions. | / | ✓ | |
| 3 | Schedule shutdown with operating personnel. | / | ✓ | |
| 4 | Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work. | ✓ | / | |
| 5 | This work should be scheduled at non-peak hours. | / | ✓ | |
| 6 | Notify affected personnel before performing PM (alarmed or security entrances). | / | ✓ | |
| 7 | Post "out of service" signs and/or barricades, as appropriate. | ✓ | / | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 1 | Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess. | ✓ | / | use PB Blaster garage door lubricant |
| 2 | Check all locking devices. Lubricate as required. | ✓ | / | |
| 3 | Inspect center gate support rollers and lubricate as required. | ✓ | / | |
| 4 | Clean roller track of any debris. | ✓ | / | no debris |
| 5 | Check bolts, fasteners, and mounting hardware. Tighten or adjust as necessary. | ✓ | / | all are tight |
| 6 | Check for any obstructions that retard full swing or movement of the gate. | ✓ | / | no obstructions |
| 7 | Check that shrubs and trees are pruned clear of gate. | ✓ | / | shrubs and trees are clear of gate |
| 8 | Check hold open devices for proper operation. Lubricate as required. | ✓ | / | used white lithium grease |
| 9 | Check the top guard and ensure that it is properly fastened and the wires are tight. Tighten as required. | ✓ | / | top guard and wires are tight |

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To be performed by: General Maintenance Worker

Additional Notes: