

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 11/2/20

Contractor Personnel on Site:

- |                         |          |
|-------------------------|----------|
| 1. <u>PATRICK BROWN</u> | 3. _____ |
| 2. _____                | 4. _____ |

**Work Performed:**

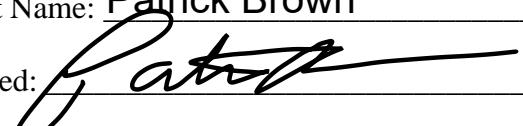
**Preventive Maintenance** - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. WO'S 10387FQ, 10404MO, 10493-10499QT, 10624SA, 10637PMM, 10651PMQ
  2. 10500-10502QT, 10652Q, 10503-10504QT
  3. ICE MAKERS, LIGHTING, WATER PUMP, FREEZER, GATE, ISOLATION VALVES,
  4. GLYCOL FEED SYSTEM, CHLLER, EXPAN TANKS, WATRE HEATERS
  5. \_\_\_\_\_
- 

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 11/2/20

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: AMMIE MEARERO Date: 11/2/20

Signed: 

E-Mail: \_\_\_\_\_

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**EMERGENCY EXIT SIGNS AND WALL PACKS**

ACTIVITY AND BLDG #: **NY067-02**

LOCATION/RM #: **WO# 10501 ASSET # 10637**  
**10502 10638**

MECHANIC  
SIGNATURE

DATE: **11/2/20**

START TIME: **3pm**

FINISH TIME: **3:30pm**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Inspect for structural defects, note needed repairs	✓	/	
2	Push test buttons and observe light operation. Note any units that do not operate properly.- Report issues and open a CM ticket	✓	/	
3	Clean exterior with dry cloth.	✓	/	
4	For Exit lights check for proper arrow direction.	✓	/	
5	Make and/or recommend any needed repairs.	✓	/	

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:** **there is only 1 emergency light wall pack and it does not work**  
**there should be at least three and the two emergency exit signs**  
**need to be replaced I'm requesting a CM ticket to be opened for**  
**these issues**