

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 1/12/21

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 11174 - ,11179,11180, -
  2. 11185,11310,11362,11363,11364,11435,1144
  3. 3,11365,11366
  4. ASSET#'S 10570 - 10581 ,
  5. 10612,10620,10621,10622,90917-450 ,
  - 190917-421
- 

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1/12/21

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:

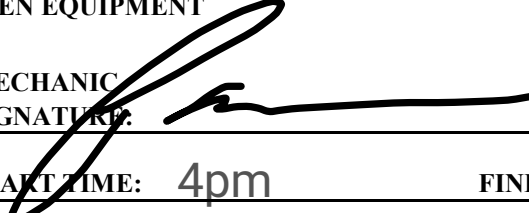
Print Name/Rank: SSG WILLIAM MONTES Date: 1/12/21

Signed: 

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

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **MISCELLANEOUS KITCHEN EQUIPMENT**

ACTIVITY AND BLDG #: NY067 BLDG1  
 LOCATION/RM #: kitchen WO# 11177 ASSET # 10573  
 11178 10574

MECHANIC SIGNATURE:  DATE: 1/12/21  
 START TIME: 4pm FINISH TIME: 5pm

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	✓		
2	De-energize, lock out, and tag electrical circuits and fuel service.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operator or manager for any deficiencies, verify cleaning program.	✓		no deficiencies noted
2	Check all controls, mechanisms for proper operation; adjust as required.	✓		controls function properly
3	If applicable, examine utility supply line, piping, valve packing, specialties, and insulation; look for any leaks.	✓		no leaks found
4	If applicable, check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.	✓		Powerline and disconnect are in good condition
5	Ensure unit is clean and in working order. Note any deficiencies.	✓		unit is clean and in working order

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 discription of the deficiency.

To be performed by: General Maintenance Worker

**Additional Notes:**