

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE001 Date of Visit: 11/7/19

Contractor Personnel on Site:

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

**Work Performed:**

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

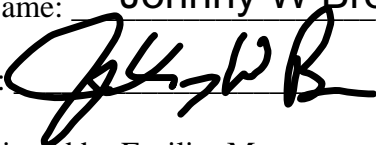
1. WO'S 11126MO,11138QT,11162SA,11189F,11200Q,11139QT, 11214PMS
2. OUTSIDE LIGHTING, REFRIGERATOR, WATER HEATERS, TIME CLOCK,
3. DEHUMIDIFIER, FILTER, AIR HANDLER,
4. \_\_\_\_\_
5. \_\_\_\_\_

-----

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 11/7/19

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: Lucinda Mcbroom Date: 11/7/19

Signed: 

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

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

**SITE AND BLDG #:** DE001-01

MECHANIC  
SIGNATURE \_\_\_\_\_

**DATE:** 11/7/19

**LOCATION/RM #:** **WO# 11189**

**START TIME:** 0900

**FINISH TIME:** 1630

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS <small>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)</small>
		YES	NO	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check, clean, and/or replace filters as required.			
2	Initial and Date Filter (if disposable)			
3	Initial and Date Yellow Maintenance Tag (if applicable)			
ASSET #	SIZE	QTY		NOTES/ ACTIONS
	Record Size :			
190918-108	16X20X2	4		
	NOTE : Any AHU with outside air -Filter gets replaced Quarterly			
	All other filters get replaced annually But inspected Quarterly			

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 Technician

**Additional Notes:**