

**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:

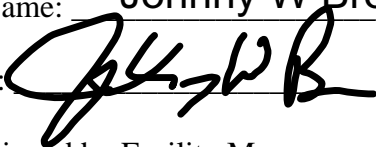
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

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 **TIME CLOCK, LIGHTING**

SITE AND BLDG #: DE001-01

**MECHANIC
SIGNATURE:**



DATE: 11/7/19

LOCATION/RM #: WO# 11138 ASSET # 1472

START TIME: 0900

FINISH TIME: 1630

11200

190918-109

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	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"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Clean timeclock using a soft lint-free cloth and spray bottle of glass cleaner. Remove any dirt or grease build up.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Check physical connections.Check wiring connections for tightness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Verify the timeclock configuration, ensure proper operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	If applicable, check battery and replace as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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: