

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY013 Date of Visit: 1/26/21

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 , 11252 - 11255 , 11386 - 11391 , 11431
2. ASSET#'S, 9223 , 9224 , 9228 , 9230 , 9215 , 9246 ,
3. 9248 , 9249 , 190917-131 , 9251 , 9264
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1/26/21

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: MR McCarthy Date: 1/26/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
GRILL

ACTIVITY AND BLDG #: **NY013 BLDG1**MECHANIC
SIGNATURE: DATE: **1/26/21**

LOCATION/RM #: **kitchen** WO# **11252** ASSET # **9223**
11253 **9224**

START TIME: **8am**FINISH TIME: **8:15am**

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 to verify cleaning program	/	/	
2	Check with operating or area personnel for any deficiencies.	/	/	
3	Check nuts, bolts, and screws for tightness; tighten or replace as required.	/	/	
4	Inspect grease trough, drip tray, splash guard, and surface condition.	/	/	
5	Examine gas utility supply line, valve packing, tighten fittings as required.	/	/	
6	Examine/clean burners and elements.	/	/	
7	On gas operated units, check pilot and gas burners for uniform flame; adjust as required.	/	/	
8	On electrically operated units, check switches, connections, and wiring for loose or overheated conditions.	/	/	
9	Check flue for proper draft or obstructions.	/	/	
10	Examine control knobs and indicating lights; adjust/replace as required.	/	/	

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:

both of these units are disconnected and out of service