

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY127 Date of Visit: 1/13/21

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
2. 11430,11449,11457,11438,11450,11458,11451,11459
3. ASSET#'S
4. 190917-646,648,649,653,654,656,657,661,684,602,621,
5. 644,724,712,687,729,732,

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1/13/21

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: CHRIS Pothier AFOS Date: 1/13/21

Signed: Chris Pothier

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

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **LIGHTING, OUTSIDE**

**SITE AND BLDG #:** NY127 BLDG2

**MECHANIC SIGNATURE:**  **DATE:** 1/13/21

**LOCATION/RM #:** MOP **WO#** 11438 **ASSET #** 190917-724 **START TIME:** 1pm **FINISH TIME:** 1:30pm

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Schedule and coordinate work with operating personnel.			
2	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Inspect lighting contactor for pitting or arcing - report issues			no pitting or arcing
2	Inspect visual condition of wiring. Look for evidence of overheating.			no evidence of overheating
3	Check for proper light operation.			lights function properly
4	Test operation of automatic switches/ time clock/ photocells if applicable.			all function properly
5	Inspect light pole and mounting devices for deficiencies.			light pole and mounting are good
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.			no noted deficiency

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:**