

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: VA049 Date of Visit: 2/25/20

Contractor Personnel on Site:

- |                          |          |
|--------------------------|----------|
| 1. <u>RICHARD WALKER</u> | 3. _____ |
| 2. _____                 | 4. _____ |

**Work Performed:**

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

1. WO'S 11603FQ, 11665QT, 11672SA, 11693PMF, 11666QT
2. FILTERS, KITCHEN EQUIP, WATER HEATERS, LIGHTING AIR FILTER CEILING
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

-----

**CERTIFICATION OF WORK**

To be signed by the Contractor:


Print Name: Richard Walker Date: 2/25/20

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: ANDERSON, Mark GS-11 Date: 2/25/20

Signed: 

E-Mail: mark.s.anderson7.mil@mail.mil

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

**SITE AND BLDG #:** VA049-01

mech Room

LOCATION/RM #: *Common Areas* WO# 11603 / 11693

**MECHANIC  
SIGNATURE:**

DATE: 2.20.2020

**START TIME:**

FINISH TIME: 5 PM

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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Initial and Date Filter (if disposable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Initial and Date Yellow Maintenance Tag (if applicable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
ASSET #	SIZE	QTY		NOTES/ ACTIONS
	Record Size :			
2312	(4) 25x25x2, (2) 20x25x2, (4) 16x25x2			
2313	(6) 16x25x2, (2) 20x25x2, (4) 25x25x2			
190918-245		16		order by more 20x20 x1
	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:**

