

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE001 Date of Visit: 7/14/20

Contractor Personnel on Site:

- |                      |          |
|----------------------|----------|
| 1. <u>JOHN BROWN</u> | 3. _____ |
| 2. _____             | 4. _____ |

**Work Performed:**

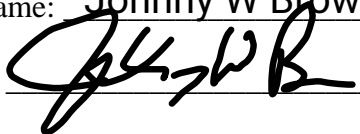
**Preventive Maintenance** - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. WO'S 12347AN, 12369AN, 12381SA, 12341PMS, 12348AN, 12382SA, 12342PMS
2. AIR COMPRESSOR, FENCE CHAINS, MEP SITE LIGHTS, CIRCULATING PUMP, MANUAL GATE
3. OVERHEAD DOOR, KEYCARD READER, DHW BOILER ROOM
4. \_\_\_\_\_
5. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:


Print Name: Johnny W Brown Date: 7/14/20

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: SPC 4 Janpablo Lopez Date: 7/14/20

Signed: 

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

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST FENCES

**SITE AND BLDG #:** DE001-02

**MECHANIC  
SIGNATURE:**



**DATE:** 7/14/20

**LOCATION/RM #:**                      **WO#** 12348                      **ASSET #** 1013

**START TIME:** 0900

**FINISH TIME:** 1630

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS  (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check posts and corner posts, support guys, and horizontal bars between each support post.	///		
2	Check wire and anchor point; re-stretch and re-anchor if necessary.	///		
3	Inspect fence anchors along the bottom of the fence and at the point where the fence is connected to the post.	///		
4	Report any damage to fence that would cause a security concern	///		
5	Inspect the bottom of the fence to ensure that there is not a gap larger than 2 inches under the fence.	///		
6	Check the top guard and ensure that it is properly fastened (angled out) and the wires are tight.	///		
7	Inspect all wire ties. Note any deficiencies	///		

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:**