

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 4/21/21

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, 12413 - 12416 , 12469 , 12470 , 12476 , 12477 ,
2. 12490 ,
3. ASSET#'S, 9899 - 9901 , 9932 , 9935 , 9945 , 190917-, 252 ,
4. 272 , 269
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 4/21/21

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: SGT STORMS Date: 4/21/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
CCTV CAMERA/SECURITY MONITOR

SITE AND BLDG #: NY039 BLDG1

**MECHANIC
SIGNATURE:** 

DATE: 4/21/21

LOCATION/RM #: BLDG1 **WO#** 12415 **ASSET #** 9901
 12476 190917-252

START TIME: 10:30am

FINISH TIME: 11:30am

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"/>		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	For the system's camera and housing, verify the following: - Camera/lens focus is adjusted properly. - Camera field of view is adjusted to customer's requirements. - Camera lens is dust free. - Interior of camera enclosure is clean and dry. - Check operation of pan tilt and zoom focus. Use controller in control room to check all these operations.	<input checked="" type="checkbox"/>		all are good
2	For the system's wiring and cables, verify the following: - Check wiring and cable harnesses for wear and fray. - Check to make sure cable is dressed properly. - Check connectors and cable entry points for loose wiring. - Check that the coaxial cable is transmitting an adequate video signal to control room. Signal should be free of distortion, tearing, hum-bars, EMI, and rolling. - Make sure all coaxial connectors are insulated from conduit and pull boxes.	<input checked="" type="checkbox"/>		cable's and wiring are correct

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
3	For the system's control equipment, verify the following: - Monitors are free from picture burn-in and distortion. - Monitors have proper contrast and brightness. - Check that all control equipment is operational. - Clean all monitor screens, control panels, and keyboards with a diluted cleaning solution. - Check all coaxial connectors on the back panels for loose connections. - Check all power connections to ensure AC plugs are not loose.	✓		

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: