

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE007 Date of Visit: 9/24/20

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 12643MO,12668QT,12694SA,12730PMQ,12737PMS,12644MO
2. LIGHTING, CIRCULATING PUMPS, HVAC CONTROL PANELS,
3. EXPANSION TANKS, GLYCOL FEEDER, WALL PACKS, GATE
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 9/24/20

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:  Danielle Barrett Date: 9/24/20

Signed: _____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

DDC CONTROLLER

SITE AND BLDG #: **DE007-01**MECHANIC
SIGNATURE: DATE: **9/24/20**LOCATION/RM #: **WO# 12694 ASSET # 1766-1770**
12737 190918-134START TIME: **0900**FINISH TIME: **1630**

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.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Obtain username and password for login. If not available, contact appropriate company manager to obtain access.			
2	Login into system, check for any alarms currently on system. Make necessary repairs to correct alarms back to normal state.			
3	Check physical condition of the device. Shut off power to the unit.Vacuum any remaining dust. Turn power back on to the unit.			
4	Check all fuses for evidence of heating or weakening.			
5	Check sytem for alarms			
6	Check all plug connections in the panel to ensure the plugs are fully seated.			

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: HVAC Technician

Additional Notes:











PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
EMERGENCY EXIT SIGNS AND WALL PACKS

ACTIVITY AND BLDG #: DE007-01

**MECHANIC
SIGNATURE:**

 **DATE:** 9/24/20

LOCATION/RM #: WO# 12737 **ASSET #** 190918-139 **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	Inspect for structural defects, note needed repairs			
2	Push test buttons and observe light operation. Note any units that do not operate properly.- Report issues and open a CM ticket			
3	Clean exterior with dry cloth.			
4	For Exit lights check for proper arrow direction.			
5	Make and/or recommend any needed repairs.			

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 perfomed by: General Maintenance Worker

Additional Notes: