

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: VA701 Date of Visit: 11.24.2020

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 12955PFQ, 13036PMSA, 13042PMA, 13064PMM, 13080PMQ, 13041SA,
2. 13072PMQ
3. FILTERS, DEHUMIDIFIER, AHU UNITS, ERV, CHILLER, GUTTERS
4. DOWNSPOUTS, MISC KITCHEN EQUIPMENT, LIGHTING, WATER HEATER
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Richard Walker Date: 11.24.2020

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. Casey Date: 11.24.2020

Signed: \_\_\_\_\_

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

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

### INTERIOR LIGHTING

ACTIVITY AND BLDG #: VA701-02

MECHANIC  
SIGNATURE:

Richard Walker DATE: 11.24.2020













LOCATION/RM #: Back of Property WO# 13072 ASSET # 3Y244

START TIME:

8am

FINISH TIME:

4pm

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	Visually check all accessible areas for burned out bulbs and/or flickering lights. Check with the facility manager to see if they know of any outages.			
2	Replace bulbs where applicable. Note quantity of bulbs replaced. If lift is required, schedule accordingly.			
3	Test light fixture. If light does not work, replace starters and/or ballasts as necessary.			
4	Note and report any needed electrical repairs.			
5	Properly dispose of any non-working bulbs and ballasts.			
6	Clean up area and remove any trash.			

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:

Did not see any  
not working

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**EMERGENCY EXIT SIGNS AND WALL PACKS**

ACTIVITY AND BLDG #: VA701-02

MECHANIC

SIGNATURE:

Richard Walker

DATE:

11.24.2020

LOCATION/RM #: Storage?

WO# 13072

ASSET # 3Y245

START TIME:

8am

FINISH TIME:

4pm

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:**