

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY013 Date of Visit: 6/28/21

Contractor Personnel on Site:

1. Patrick Brown 3. _____
2. _____ 4. _____

Work Performed:

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

1. WO#'S, 12939 , 12997-12999 , 13213 , 13214 ,
2. 13270 , 13280 , 13288 , 13293 , 13081 , 13215 ,
3. 13271 , 13294
4. ASSET#'S , 9209-9213 , 9242 , 9265 , 9250 , 190917- ,
5. 101 , 131 , 133-137 , 129 , 130 , 143 ,

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 6/28/21

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: SFC KEVIN STEWART Date: 6/28/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FENCES

MECHANIC
 SIGNATURE: 

DATE: 6/28/21

SITE AND BLDG #: NY013 BLDG1

LOCATION/RM #: outside WO# 13270

ASSET # 190917-135

START TIME: 10am

FINISH TIME: 10:30am

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.	✓	/	all are good
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.	✓	/	fence anchors are good
4	Report any damage to fence that would cause a security concern	✓	/	no security concerns
5	Inspect the bottom of the fence to ensure that there is not a gap larger than 2 inches under the fence.	✓	/	no gaps
6	Check the top guard and ensure that it is properly fastened (angled out) and the wires are tight.	✓	/	top guard is properly fastened
7	Inspect all wire ties. Note any deficiencies	✓	/	no deficiencies found

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 Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
EXHAUST FANS

SITE AND BLDG #: NY013 BLDG1

assembly hall

LOCATION/RM #: WO# 12939 ASSET # 9212

13270 190917-101

MECHANIC
SIGNATURE

DATE: 6/28/21

START TIME: 8am

FINISH TIME: 8:30am

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.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Clean unit, especially fan blades.	✓		unit is clean
2	Inspect pulleys, belts, couplings, etc.; adjust tension and tighten mountings as necessary. Change badly worn belts. Multiple belts should be replaced with matched sets.	✓		belts and pulleys are good
3	Perform required lubrication and remove old or excess lubricant.	✓		used Lucas heavy duty Grease
4	Clean motor with vacuum or low pressure dry air (less than 40 psig). Check for obstructions in motor cooling and air flow.	✓		no obstructions found
5	Check structural members, vibration eliminators, and flexible connections. Check fan housing to ensure there is no damage and the housing is tight.	✓		no damage found
6	Start unit and check for vibration and noise.	✓		no vibration or noise
7	Remove all trash and debris.	✓		

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To be performed by: General Maintenance Worker

Additional Notes: