

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY051 Date of Visit: 6/3/21

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 , 12890-12894, 12959, 12960, 13038, 13039, 13104,
2. 13105, 13283, 13306, 12961, 12962, 13066, 13106, 13107,
3. 13307
4. ASSET#'S , 10038-10042, 10035, 10036, 10066, 10069,
5. 10065, 10073-10077, 10080, 190917-294, 292, 299, 293,
297, 298, 300, 303-306

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 6/3/21

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 PATRIC HANLON Date: 6/3/21

Signed: _____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

GATES

SITE AND BLDG #: **Ny051 BLDG1**MECHANIC
SIGNATURE: DATE: **6/3/21**LOCATION/RM #: **ny051** WO# **13039** ASSET # **10069**
13283 **190917-**START TIME: **9:30am**FINISH TIME: **10:15am**

CHECK POINT	CHECKPOINT DESCRIPTION	292,297,298		123 COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	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"/>	<input checked="" type="checkbox"/>			
2	Notify affected personnel before performing PM	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
TO BE PERFORMED AT EACH INSPECTION SERVICE						
1	Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			used PB blaster garage door lubricant
2	Check all locking devices. Lubricate as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			all are good
3	Inspect gate support rollers and track, lubricate and clean as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			used white lithium grease
4	Check bolts, fasteners, and mounting hardware. Tighten as necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			all are tight
5	Check for any obstructions that prevent full swing or movement of the gate.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			no obstructions
6	Check that shrubs and trees are pruned clear of gate.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			shrubs and trees are clear of gate
7	Check hold open devices for proper operation. Lubricate as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
8	Check the top guard and ensure that it is properly fastened and the wires are tight. Tighten as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			top gaurd and wires are tight
9	If applicable, inspect hydraulic driveline (hoses, fittings, and gauges) for signs of leakage.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			no hydraulics
10	If applicable, inspect limit switches for proper operation. Adjust as needed.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			limit switches are correct
11	If applicable, inspect photoeyes for proper operation and any signs of damage.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			no sign's of damage
12	If applicable, have site personnel operate gate with CAC Card insuring proper operation.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			gate functions properly with card
13	If applicable, clean control cabinent, ensuring free from debris and insects.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			no debris or insects

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:

there is a capital project to replace these Gates need to be replaced

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

LIGHTING, OUTSIDE

SITE AND BLDG #: NY051 BLDG1
 LOCATION/RM #: MOV,POV
 PARKING

WO# 13105
 13283

ASSET # 10065

MECHANIC
 SIGNATURE: 

DATE: 6/3/21

START TIME: 9am

FINISH TIME: 9:30am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Schedule and coordinate work with operating personnel.	<input checked="" type="checkbox"/>		
2	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	Inspect lighting contactor for pitting or arcing - report issues	<input checked="" type="checkbox"/>		no pitting or arcing
2	Inspect visual condition of wiring. Look for evidence of overheating.	<input checked="" type="checkbox"/>		no evidence of overheating
3	Check for proper light operation.	<input checked="" type="checkbox"/>		lights function properly
4	Test operation of automatic switches/ time clock/ photocells if applicable.	<input checked="" type="checkbox"/>		all function properly
5	Inspect light pole and mounting devices for deficiencies.	<input checked="" type="checkbox"/>		light pole and mounting are good
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	<input checked="" type="checkbox"/>		no noted deficiency

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To be performed by: General Maintenance Worker

Additional Notes: