

CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: VAD99 Date of Visit: 2.03-04.2021

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. _____
 2. _____
 3. _____
 4. _____
 5. _____
-

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Richard Walker Date: 2 04.2021

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: Don Hudson Date: 2 04.2021

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FILTER REPLACEMENT

SITE AND BLDG #: VA099-01

LOCATION/RM #: Mechanical Room WO# 13488 Asset# 2363 2361, 2362

MECHANIC
SIGNATURE: *Richard Walker*

DATE: 2.03.2021

START TIME: 5:30am

FINISH TIME: 3pm

| 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, clean, and/or replace filters as required. | ✓ | / | | | |
| 2 | Initial and Date Filter (if disposable) | ✓ | / | | | |
| 3 | Initial and Date Yellow Maintenance Tag (if applicable) | ✓ | / | | | |
| ASSET # | SIZE | QTY | NOTES/ ACTIONS | | | |
| Record Size : | | | | | | |
| 2362 | 12x25x2 | 1 | | | | |
| | 16x25x2 | 3 | | | | |
| 2363 | 16x25x2 | 2 | | | | |
| | 14x25x2 | 2 | | | | |
| 2361 | 14x25x2 | 4 | | | | |
| | 20x25x2 | 12 | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| NOTE : Any AHU with outside air -Filter gets replaced Quarterly | | | | | | |
| All other filters get replaced annually But inspected Quarterly | | | | | | |

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 Technician

Additional Notes: