

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 7/15/21

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 , 13476-13498 , 13810 , 13862-13864 , 13934 , 13946 ,
2. 13954 , 13499-13504 , 13865 , 13866 , 13935 , 13955 , 13867 ,
3. 13868 , 13956 ,
4. ASSET#'S , 10582-10584 , 10586-10593 , 10596-10607 , 10612 ,
5. 10620-10622 , 10630-10635 , 10639 , 10640 , 10645 , 10646 ,

190917- , 438-445 , 450 , 421 , 457 , 454 , 461

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 7/15/21

Signed: 

To be signed by Facility Manager:

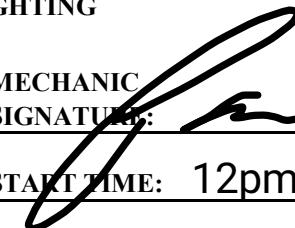
By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: SFC WILLIAM MONTES Date: 7/15/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
INTERIOR LIGHTING

MECHANIC
SIGNATURE: 

DATE: 7/15/21

ACTIVITY AND BLDG #: NY067 BLDG1

LOCATION/RM #: BLDG1

WO# 13954

ASSET #190917-421

START TIME: 12pm

FINISH TIME: 12:30pm

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.	✓	/	no flickering lights
2	Replace bulbs where applicable. Note quantity of bulbs replaced. If lift is required, schedule accordingly.	✓	/	no bulbs needed to be replaced
3	Test light fixture. If light does not work, replace starters and/or ballasts as necessary.	✓	/	no starters or ballast replaced
4	Note and report any needed electrical repairs.	✓	/	no 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 description of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes: