CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE

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

FACID/Building: NY127 Date of Visit: 7/19/21

Contractor Personnel on Site:

1. PATRICK BROWN
2. _____
3. _____
4. _____

Work Performed:

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

1. WO#'S , 13941 , 13949 , 13961 , 13969 , 13962 , 13970 ,
2. 13939 , 13960 , 13968 , 13940 ,
3. ASSET#'S , 190917-, 717-724 , 712 , 687 , 729 , 732 , 630 ,
4. 647 , 650 , 658 , 662-676 , 684 , 602 , 621 , 644 , 689
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 7/19/21

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: SSG O'CONNOR Date: 7/19/21

Signed: _____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
INTERIOR LIGHTING

ACTIVITY AND BLDG #: NY127 BLDG1

MECHANIC SIGNATURE:

DATE: 7/19/21

LOCATION/RM #: BLDG1 **WO#** 13960 **ASSET #** 190917-684

START TIME: 10am **FINISH TIME:** 10:30am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES	TASK COMPLETE NO	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
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 discription of the deficiency.
To be perfomed by: General Maintenance Worker
Additional Notes: