

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY127 Date of Visit: 9/20 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, 14413 , 14809 , 14819 , 14835 , 14414 , 14810 , 14816 ,  
2. 14820 , 14836 ,  
3. ASSET#'S, 190917- , 605-614 , 617 , 634 , 635 , 600 , 601 , 643 ,  
4. 628 , 629 , 655 , 695 , 698 , 705 , 688 , 715 , 724 , 697 , 691-695  
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 9/20/21

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 HOPPER Date: 9/20/21

Signed: 

E-Mail: \_\_\_\_\_

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**FILTER REPLACEMENT**

SITE AND BLDG #: **NY127 BLDG2**MECHANIC  
SIGNATURE: DATE: **9/20/21**LOCATION/RM #: **BLDG2 WO# 14414**START TIME: **1:30pm**FINISH TIME: **2:30pm**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check, clean, and/or replace filters as required.	✓	X	
2	Initial and Date Filter (if disposable)	✓	X	
3	Initial and Date Yellow Maintenance Tag (if applicable)	✓	X	
ASSET #	SIZE	QTY	NOTES/ ACTIONS	
	Record Size :			
190917-				
691	16x24x2	1		
695	15x11-3/8x3/8 box filter	4/2	15x11 are washable	
698	16x20x2 / 16x25x2/20x16x12	6/4/6		
705	20x20x4	1		
706	16x20x4	1		
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:**