

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE007 Date of Visit: 07/20/21

Contractor Personnel on Site:

- |          |          |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

**Work Performed:**

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

- |          |       |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

73

45

-----

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 07/20/21

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: Danielle Barrett Date: 07/20/21

Signed: 

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

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **GATES**

SITE AND BLDG #: **DE007 B-1**MECHANIC  
SIGNATURE: DATE: **07/20/21**

LOCATION/RM #:

WO# **14435**ASSET # **1772-1776**

START TIME:

**0900**FINISH TIME: **1630**

| CHECK POINT                                | CHECKPOINT DESCRIPTION                                                                                                                                      | TASK COMPLETE                                                                         |    | NOTES/ ACTIONS<br>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----|-------------------------------------------------------------------------|
|                                            |                                                                                                                                                             | 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. |    |    | the 2 main gates are still inop because of construction damage          |
| 2                                          | Notify affected personnel before performing PM                                                                                                              |    |    |                                                                         |
| TO BE PERFORMED AT EACH INSPECTION SERVICE |                                                                                                                                                             |                                                                                       |    |                                                                         |
| 1                                          | Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.                                                            |    |    |                                                                         |
| 2                                          | Check all locking devices. Lubricate as required.                                                                                                           |    |    |                                                                         |
| 3                                          | Inspect gate support rollers and track, lubricate and clean as required.                                                                                    |    |    |                                                                         |
| 4                                          | Check bolts, fasteners, and mounting hardware. Tighten as necessary.                                                                                        |    |    |                                                                         |
| 5                                          | Check for any obstructions that prevent full swing or movement of the gate.                                                                                 |    |    |                                                                         |
| 6                                          | Check that shrubs and trees are pruned clear of gate.                                                                                                       |    |    |                                                                         |
| 7                                          | Check hold open devices for proper operation. Lubricate as required.                                                                                        |    |    |                                                                         |
| 8                                          | Check the top guard and ensure that it is properly fastened and the wires are tight. Tighten as required.                                                   |    |    |                                                                         |
| 9                                          | If applicable, inspect hydraulic driveline (hoses, fittings, and gauges) for signs of leakage.                                                              |    |    |                                                                         |
| 10                                         | If applicable, inspect limit switches for proper operation. Adjust as needed.                                                                               |   |    |                                                                         |
| 11                                         | If applicable, inspect photoeyes for proper operation and any signs of damage.                                                                              |  |    |                                                                         |
| 12                                         | If applicable, have site personnel operate gate with CAC Card insuring proper operation.                                                                    |  |    |                                                                         |
| 13                                         | If applicable, clean control cabinet, ensuring free from debris and 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 perfromed by: General Maintenance Worker

**Additional Notes:**

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **MANUAL/AUTOMATIC OVERHEAD DOORS**

**SITE AND BLDG #:** DE007 B-1

**MECHANIC SIGNATURE:**  **DATE:** 07/20/21

**LOCATION/RM #:** WO# 14435 ASSET # 1777-1779 **START TIME:** 0900 **FINISH TIME:** 1630

| CHECK POINT                                | CHECKPOINT DESCRIPTION                                                                                                                                                                                                                | TASK COMPLETE |    | NOTES/ ACTIONS<br>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|--------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----|-------------------------------------------------------------------------|
|                                            |                                                                                                                                                                                                                                       | 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.                                                                           |               |    |                                                                         |
| TO BE PERFORMED AT EACH INSPECTION SERVICE |                                                                                                                                                                                                                                       |               |    |                                                                         |
| 1                                          | Check with door operating personnel for any known deficiencies.                                                                                                                                                                       |               |    |                                                                         |
| 2                                          | Inspect general arrangement of door and mechanism, mountings, standards, wind locks, anchor bolts, counterbalances, weather stripping, door sweeps etc. Clean, tighten, and adjust repair as required.                                |               |    |                                                                         |
| 3                                          | If applicable, operate with power from start to stop and at intermediate positions. Observe performance of various components, such as brake, limit switches, door operating speed, motor, gear box, etc. Clean and adjust as needed. |               |    |                                                                         |
| 4                                          | Check operation of safety edges, stops, electric eye, treadle, or other operating devices. Clean and make required adjustments or repairs.                                                                                            |               |    |                                                                         |
| 5                                          | Check manual operation. Note brake release, motor disengagement, functioning or hand pulls, chains sprockets, clutch, etc.                                                                                                            |               |    |                                                                         |
| 6                                          | If applicable, examine all wiring, motor, starter, push button, etc., blow out or vacuum if needed.                                                                                                                                   |               |    |                                                                         |
| 7                                          | If applicable, inspect gear box, change or add oil as required.                                                                                                                                                                       |               |    |                                                                         |
| 8                                          | Perform required lubrication. Remove old or excess lubricant.                                                                                                                                                                         |               |    |                                                                         |
| 9                                          | Clean unit and mechanism thoroughly.                                                                                                                                                                                                  |               |    |                                                                         |
| 10                                         | Clean up and remove all debris.                                                                                                                                                                                                       |               |    |                                                                         |

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:**