

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD002 Date of Visit: 08/17/21

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. _____

74

45

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 08/17/21

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 Jason Lamontagne Date: 08/17/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

SITE AND BLDG #: MD002 B-1

MECHANIC
SIGNATURE

DATE: 08/06/21

LOCATION/RM #: WO# 14559

START TIME: 0900

FINISH TIME: 1630

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ ACTIONS <small>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)</small> |
|---|---|---------------|----|--|
| | | 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 : | | | |
| 1805 | 24x24x2, 12x24x2 | 3 & 3 | | |
| 1806 | 16x20x4, 16x20x1 | 6 & 6 | | |
| 1807 | 24x24x2, 12x24x2 | 1 & 1 | | |
| 1808 | 24x24x2 | 1 | | |
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| | 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: