

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 8/30/21

Contractor Personnel on Site:

- |                         |          |
|-------------------------|----------|
| 1. <u>PATRICK BROWN</u> | 3. _____ |
| 2. _____                | 4. _____ |

**Work Performed:**

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

1. WO#'S , 14408 , 14537 , 14608 , 14069 , 14633 , 14634 ,
2. 14805 , 14813 , 14818 , 14829 , 14665
3. ASSET#'S , 9902 , 9891 , 9896 , 9932 , 9935 , 9943 , 190917-,
4. 248 , 269 , 264 , 249
5. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 8/30/21

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: CPL NEWCOMB Date: 8/30/21

Signed: \_\_\_\_\_

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

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

**SITE AND BLDG #:** NY039 BLDG1

**MECHANIC  
SIGNATURE**

**DATE:**

**LOCATION/RM #: BLDG1 WO# 14408,14608,14609**

START TIME: 7am

**FINISH TIME:** 8am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS <small>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)</small>
		YES	NO	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
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 :			
9896	8x23x1 - 11x3x16	14 - 6		
9891	20x20x2 / 20x30x2	0		ahu is out of service at this time
190917-248	permanent filters			
	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:**