

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 5/26/22

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 , 16919 , 16941 , 17023 , 17024-17029 , 17132 , 17146 ,
2. 17166 , 17030-17032 , 17167 , 17033 , 17034
3. ASSET#'S , 10568 , 10612 , 10559 , 10560 , 10566 , 10567 , 10568 ,
4. 10613 , 10614 , 10551 , 10636 , 10637 , 10638 , 10643 , 10644 ,
5. 190917- , 450 , 430-433 , 446 , 449 , 455

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 5/26/22

Signed: 

To be signed by Facility Manager:

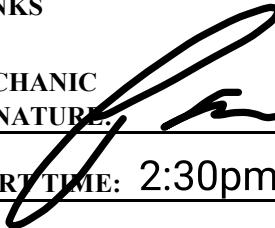
By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Ammie Mearero Date: 5/26/22

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
EXPANSION TANKS

SITE AND BLDG #: **NY067 BLDG2**MECHANIC
SIGNATURE: DATE: **5/26/22**LOCATION/RM #: **BLDG2**WO# **17167**ASSET # **190917-455**START TIME: **2:30pm**FINISH TIME: **3pm**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (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	Examine exterior of tank including fittings and valves for leaks, signs of corrosion, and correct as needed.	✓	/	no sign of corrosion or leaks
2	If applicable, Check sight glass, insure level is between 1/2 and 3/4 sight glass. Correct as needed.	/	✓	no sight glass
3	If applicable, check tank pressure via schrader valve. Correct as needed.	✓	/	pressure is correct

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 Worker

Additional Notes: