

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 6/6/22

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, 17224, 17256, 17257-17259, 17306-17310, 17363, 17386,
2. 17387, 17452-17457, 17561, 17570, 17605, 17388, 17458, 17459,
3. 17460, 17606, 17461, 17607
4. ASSET#'S, 10552-10555, 10547-10550, 10558, 10612, 10610,
5. 10615, 10556, 10557, 10611, 10617-10619, 10641, 10623-10625,  
10642, 190917-, 423, 424, 427, 428, 451, 450, 423-429, 448, 460,  
462

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 6/6/22

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: 6/6/22

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

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

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

### FENCES

SITE AND BLDG #: NY067 BLDG1

MECHANIC  
SIGNATURE: 

DATE: 6/6/22

LOCATION/RM #: mov parking

WO# 17561

ASSET # 190917-451

START TIME: 2:30pm

FINISH TIME: 3:30pm

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check posts and corner posts, support guys, and horizontal bars between each support post.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	all are good
2	Check wire and anchor point; re-stretch and re-anchor if necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3	Inspect fence anchors along the bottom of the fence and at the point where the fence is connected to the post.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	fence anchors are good
4	Report any damage to fence that would cause a security concern	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no security concerns
5	Inspect the bottom of the fence to ensure that there is not a gap larger than 2 inches under the fence.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no gaps
6	Check the top guard and ensure that it is properly fastened (angled out) and the wires are tight.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	top guard is properly fastened
7	Inspect all wire ties. Note any deficiencies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no deficiencies found

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:**