

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY013 Date of Visit: 5/2/19

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. <u>3596QT, 3597QT, 3598QT, 3599QT, 3600QT, 3601QT, 3602QT, 3603QT, 3604QT, 3605QT</u>	_____
2. <u>REFRIGERATORS, WATER HEATERS, EMERGENCY LIGHTING</u>	_____
3. _____	_____
4. _____	_____
5. _____	_____

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 5/2/19

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: Candy hutchins Date: 5/2/19

Signed: Candy hutchins

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**EMERGENCY EXIT SIGNS AND WALL PACKS**

ACTIVITY AND BLDG #: **NY013-B2**MECHANIC  
SIGNATURE: DATE: **5/2/19**LOCATION/RM #: **WO# 3604 ASSET # 9262**  
**3605 9263**START TIME: **9:15am** FINISH TIME: **9:30am**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
1	In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered to.	✓		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Inspect for structural defects, note needed repairs	✓		no structural defects or repairs needed
2	Push test buttons and observe light operation. Note any units that do not operate properly.	✓		all signs operate correctly
3	Clean exterior with dry cloth.	✓		
4	For Exit lights check for proper arrow direction.	✓		Arrow directions are proper
5	Make and/or recommend any needed repairs.		✓	no repairs needed

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:**