

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 12/20/19

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. WO6124-6128FQT, WO6192MO,WO6211-6222QT,WO6296-6301SA
2. WO6422PMM,WO6452PMS, WO6223QT,WO6302-6304SA, WO6453PMS
3. WO6305SA,WO6454PMS
4. FILTERS, LIGHTING,SUMP PUMP,GREASE TRAP,HEATERS,GATES
5. WALL PACKS,EXHAUST SYSTEM,

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 12/20/19

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: SSG WILLIAM MONTES Date: 12/20/19

Signed: Will J. Montes

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

GATES

MECHANIC

SIGNATURE: 

DATE: 12/20/19

SITE AND BLDG #: NY067-01

LOCATION/RM #: 6299 - 6301 10611, 10617 - 10619

WO#

6422

ASSET #

190917-450

START TIME: 11:30am

FINISH TIME: 12:30pm

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.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	Notify affected personnel before performing PM (alarmed or security entrances).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	used PB blaster garage door lubricant
2	Check all locking devices. Lubricate as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3	Inspect center gate support rollers and lubricate as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	used white lithium grease
4	Clean roller track of any debris.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no debris
5	Check bolts, fasteners, and mounting hardware. Tighten or adjust as necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	all are tight
6	Check for any obstructions that retard full swing or movement of the gate.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no obstructions
7	Check that shrubs and trees are pruned clear of gate.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	shrubs and trees are clear of gate
8	Check hold open devices for proper operation. Lubricate as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
9	Check the top guard and ensure that it is properly fastened and the wires are tight. Tighten as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	top guard and wires are tight

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: