

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY013 Date of Visit: 1/28/20

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 6637-6640AN, 6778-6781SA, 6823PMM, 6782-6783SA
2. VARIOUS KITCHEN EQUIP, OVERHEAD DOORS, LIGHTING, DEHUMIDIFIER
3. _____
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1/28/20

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: SFC KEVIN STEWART Date: 1/28/20

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

LIGHTING, OUTSIDE

SITE AND BLDG #: NY013-01MECHANIC
SIGNATURE: DATE: 1/28/20LOCATION/RM #: _____ WO# 6823 ASSET # 190917-131START TIME: 10:45amFINISH TIME: 11:30am

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|--|---|---------------|----|---|
| | | YES | NO | |
| SPECIAL INSTRUCTIONS | | | | |
| 1 | Schedule and coordinate work with operating personnel. | ✓ | | |
| 2 | 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 | Inspect lighting contactor for pitting or arcing - report issues | ✓ | | no pitting or arcing |
| 2 | Inspect visual condition of wiring. Look for evidence of overheating. | ✓ | | no sign's of overheating |
| 3 | Check for proper light operation. | ✓ | | |
| 4 | Test operation of automatic switches/ time clock/ photocells if applicable. | | ✓ | lights are not functioning |
| 5 | Inspect light pole and mounting devices for deficiencies. | ✓ | | no deficiencies |
| 6 | For any noted deficiency, takes pictures and open corrective maintenance ticket. | ✓ | | |

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:

the lights are not functioning at this time the AFOS and ARFOS have been notified and are working on the issue