

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: _____ Date of Visit: _____

Contractor Personnel on Site:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

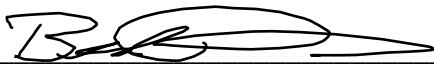
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. _____
2. _____
3. _____
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

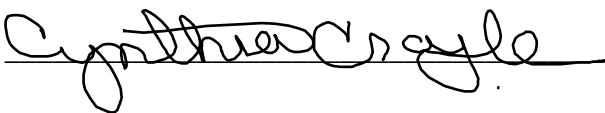
Print Name: _____ Date: _____

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: _____ Date: _____

Signed:  _____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **LIGHTING, OUTSIDE**

SITE AND BLDG #: PA. 062

MECHANIC SIGNATURE: [Signature]

DATE: 5/23/19
5/7/19

LOCATION/RM #: WO# 8595 ASSET # 7465

START TIME: 7 AM

FINISH TIME: 2 PM

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
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.	X		
2	Schedule and coordinate work with operating personnel.	X		
3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	X		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Open and tag switch.	X		
2	Inspect visual condition of wiring. Look for evidence of overheating.	X		
3	Check for proper light operation.	X		
4	Test operation of automatic switches/ time clock/ photocells if applicable.	X		
5	Inspect light pole and mounting devices for deficiencies.	X		FOUND SCREW MISSING ON ACCESS DOOR TO POLE
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	X		

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: