

**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. _____	9342QT
2. _____	-
3. _____	-
4. _____	-
<hr style="border-top: 1px dashed black;"/>	
5. _____	CERTIFICATION OF WORK
<hr style="border-top: 1px dashed black;"/>	

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 #: PA209-1

MECHANIC
SIGNATURE:

DATE:

6/7/19

LOCATION/RM #: WO# 9240 ASSET # 7473

START TIME: 7 AM

FINISH TIME: 5 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		
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 description of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
GATES

SITE AND BLDG #: **PA209-1**LOCATION/RM #: **WO# 9240** ASSET # **7560**MECHANIC
SIGNATURE: DATE: **6/3/19**START TIME: **7 AM**FINISH TIME: **5 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.	X		
2	Review manufacturer's instructions.	X		
3	Schedule shutdown with operating personnel.	X		
4	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		
5	This work should be scheduled at non-peak hours.	X		
6	Notify affected personnel before performing PM (alarmed or security entrances).	X		
7	Post "out of service" signs and/or barricades, as appropriate.	X		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Inspect all pivot points, hinges, latches, etc. Apply lubricant where needed, wiping off excess.	X		
2	Check all locking devices. Lubricate as required.	X		
3	Inspect center gate support rollers and lubricate as required.	X		
4	Clean roller track of any debris.	X		
5	Check bolts, fasteners, and mounting hardware. Tighten or adjust as necessary.	X		
6	Check for any obstructions that retard full swing or movement of the gate.	X		
7	Check that shrubs and trees are pruned clear of gate.	X		
8	Check hold open devices for proper operation. Lubricate as required.	X		
9	Check the top guard and ensure that it is properly fastened and the wires are tight. Tighten as required.	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 description of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes: