

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 2/15/22

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 ,15959 , 16007 , 16008 , 16175-16178 , 16236 ,
2. 16240 , 16259 , 16269 , 16270 , 15926 , 16179-16182
3. ASSET#'S ,9902 , 9932 , 9935 , 9898 , 9929 , 9933 ,
4. 9934 , 9930 , 9940 , 9941 , 9946 , 9947 , 190917- , 269 ,
5. 250 , 251 , 263 , 268 , 243 , 244 , 271 , 273 ,

---

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 2/15/22

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: SGT STORMS Date: 2/15/22

Signed: 

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**AIR COMPRESSOR**

SITE AND BLDG #: **NY039 BLDG2**MECHANIC  
SIGNATURE: DATE: **2/15/22**LOCATION/RM #: **BLDG2** WO# **15926**ASSET# **190917-273**START TIME: **1:30pm**FINISH TIME: **1:40pm**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
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.	✓		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Perform a visual inspection of the air system, noting any obvious leaks or portions of the air distribution network that may be subject to physical damage.	✓		
2	Change compressor crankcase oil (annually).	✓		
3	Clean or replace air intake filter, as needed.	✓		
4	Check air dryer, automatic condensate drains, and air tank for proper operation. Manually blow down condensate tank if needed. Clean condenser coils and cover grills, if applicable.	✓		
5	Inspect oil separators for any sign of oil entering the system.	✓		
6	Inspect belt alignment and condition. Adjust or replace belts as required. Belts should be replaced in complete sets.	✓		
7	Check motor starter contactor - inspect contacts for pitting or arcing	✓		
8	Clean heat exchange surfaces.	✓		
9	Check gauges to be in good condition	✓		
10	On two stage compressor, check intermediate pressure.	✓		
11	Test relief valves, replace if leaking. Do not readjust safety relief valves in the field.	✓		
12	Check cut in and cut out of compressor pressure controller, readjust if necessary for proper air pressure requirements. Do not exceed ASME maximum tank pressure.	✓		
13	Check to make sure belt guard is installed prior to putting air compressor back in service.	✓		

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
14	Check if air compressor is running excessively or frequently cycling on and off (possible leaks).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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:**

there is a CM request already submitted to have this compressor replaced