

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

FACID/Building: PA017

Date of Visit: 5/20/19

Contractor Personnel on Site:

- | | |
|------------------------|------------------------|
| 1. <u>Tony Lazares</u> | 4. <u>Gary Beitzel</u> |
| 2. <u>Jim Geertman</u> | 5. _____ |
| 3. <u>Scott Werry</u> | 6. _____ |

Work Performed:

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

- | | |
|----------------|-------|
| 1. <u>8546</u> | _____ |
| 2. <u>8652</u> | _____ |
| 3. <u>8778</u> | _____ |
| 4. _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertman Date: 5-20-19

Signed: [Signature]

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: Linda Leski Date: 5/20

Signed: [Signature]

OTHER RECURRING SERVICES CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: P2017 - 01 Date of Visit: 5/17/18

Contractor Personnel on Site:

- | | |
|-----------------------|----------|
| 1. <u>Tony Lerman</u> | 4. _____ |
| 2. <u>Jim Gertner</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

Other Recurring Services

- | | |
|----------------|-------|
| 1. <u>8597</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Lerman Date: 5/17/18
Signed: [Signature]

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: Linda Lasky Date: 5/20
Signed: [Signature]

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST HOT AIR FURNACE

ACTIVITY AND BLDG #:

P 017-01

LOCATION:

DPU W00 8772 AS26 3438

MECHANIC
SIGNATURE:

START TIME:

9:30

DATE:

5/20/18

FINISH TIME:

10:00

CHECK POINT	CHECK/REQUIRED DESCRIPTION	TASK COMPLETION		NOTES/ACTIONS (If task is not completed, 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.		✓	
2	Review manufacturer's instructions.		✓	
3	Schedule shutdown with operating personnel.		✓	
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.	✓	✓	
WORK PERFORMED AND COMPLETED				
5	Remove furnace ends and access panels if applicable.		N/A	
6	Check the fire box liner or refractory for cracks and leaks.		N/A	
7	Check smoke stack for obstructions, leaks, etc.		N/A	
8	Clean bottom of smoke stack (breaching).	✓		
9	Clean all fans and motors.	✓		
10	Check operation of controls and safeties.	✓		
11	Lubricate as required.	✓		
12	Check and clean plenum (clean cooling coils and check for leaks, if equipped.)	✓	N/A	
13	Replace furnace and access panels ends if removed.	✓	N/A	
14	Check all motors, belts, pulleys, shafts, etc. for alignment.	✓		
15	Treat all rusted areas with rust inhibitor and touch up paint.	✓		
16	Remove lock outs and tags. Restore fuel and power supply.	✓	N/A	

Note: The Contractor shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence.
Checklist compiled in accordance with:

- General Services Administration (GSA) Public Building Service, 2012. *Public Buildings Maintenance Standards Final*, October 1.
- Original equipment manufacturers (OEM) documentation for exact or similar assets, which can be located at (Provide Link to OEM Manual/Asset Library)

Additional Notes:

HV - 2

PM/ROSE

C1 3.2

C2 3.4

C3 4.1

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST HOT AIR FURNACE

ACTIVITY AND BLDG #: P2017 - 01
LOCATION: Drain 6201 6770 Asset # 2931

MECHANIC SIGNATURE: [Signature] DATE: 5/12/18
START TIME: 9:00 FINISH TIME: 9:30

GENERAL INSTRUCTIONS		SPECIAL INSTRUCTIONS		NOTES/ACTIONS	
NO.	DESCRIPTION	YES	NO	YES	NO
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.				
2	Review manufacturer's instructions.				
3	Schedule shutdown with operating personnel.				
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.	✓	✓		
5	Remove furnace ends and access panels if applicable.				
6	Check the fire box liner or refractory for cracks and leaks.				
7	Check smoke stack for obstructions, leaks, etc.				
8	Clean bottom of smoke stack (breaching).	✓		N/A	
9	Clean all fans and motors.	✓			
10	Check operation of controls and safeties.	✓			
11	Lubricate as required.	✓			
12	Check and clean plenum (clean cooling coils and check for leaks, if equipped.)	✓			
13	Replace furnace and access panels ends if removed.			N/A	
14	Check all motors, belts, pulleys, shafts, etc. for alignment.	✓			
15	Treat all rusted areas with rust inhibitor and touch up paint.	✓			
16	Remove lock outs and tags. Restore fuel and power supply.	✓		N/A	

Note: The Contractor shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence.
Checklist compiled in accordance with:
- General Services Administration (GSA) Public Building Service, 2012. *Public Buildings Maintenance Standards Final*. October 1.
- Original equipment manufacturers (OEM) documentation for exact or similar assets, which can be located at ([Provide Link to OEM Manual/Asset Library](#))

Additional Notes:

HV 1

Amperage

L1 3.7

L2 3.4

L3 4.1

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST DEHUMIDIFIER

SITE AND BLDG #:

Pr 617 -01

LOCATION/RM #:

WO#

8773

ASSET #

1032

MECHANIC

SIGNATURE:



DATE:

5/20/19

START TIME:

FINISH TIME:

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	

- 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
- 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.

- 1 Check water inlet and outlet for any leaks, repair as needed.

- 2 Clean and/or replace filter as needed.

- 3 If applicable, check hours per usage, replace tanks's as needed.

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For 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:

no Access
in vault