

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

FACID/Building: P-017

Date of Visit: 4-18-19

Contractor Personnel on Site:

1. Jim Georgegans

2. Scott Werry

3. _____

4. _____

5. _____

6. _____

Work Performed:

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

1. 8292

2. 8269

3. _____

4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Georgegans

Date: 4-18-19

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: Tracy Huber

Date: 18 Apr 19

Signed: [Signature]

E-Mail:

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

FACID/Building: PA-017

Date of Visit: 4-18-19

Contractor Personnel on Site:

1. Jim Goertgens
2. Scott Werry
3. _____

4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

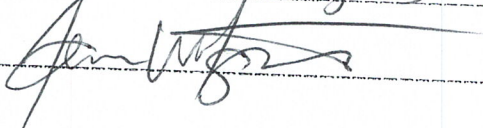
1. 8372
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Goertgens

Date: 4-18-19

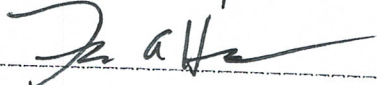
Signed: 

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: Tracy Huber

Date: 18 Apr 19

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST THERMOSTATS

STATE AND BLDG #:

PA 017

LOCATION/RM #:

mp cage

WO#

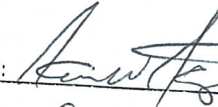
8269

ASSET #

5465

MECHANIC

SIGNATURE:



DATE:

4-18-79

START TIME:

905

FINISH TIME:

910

| CHECK DESCRIPTION | | YES/NO | | NOTES/ACTIONS | |
|---|--|--------|---|---------------|--|
| 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. | | - | | |
| 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 | If EMS (Energy Management System) exists, run the manufacturers diagnostic software for the wireless system. This diagnostic shall produce a report of all functional aspects of the wireless system indicating faults that should be addressed in this maintenance. | | - | | |
| 2 | Review all zone set points at the server. | | - | | |
| 3 | Inspect thermostat installation; ensure mounting is correct, fastened secure and that the thermostat is not blocked by equipment generating heat or furniture blocking air circulation. | | - | | |
| 4 | Remove thermostat cover and lightly blow away any accumulated dust with canned low pressure air. | | - | | |
| 5 | Check time-of-day schedule to confirm consistency with facility operation. Adjust schedule as needed. | | - | | |
| 6 | If applicable, replace battery 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 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: HVAC Technician

Additional Notes:

Set

ACC

65

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PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST THERMOSTATS

SITE AND BLDG #:

PA 017

MECHANIC

SIGNATURE:

DATE: 4-18-19

LOCATION/RM #:

MP

WO# 8269 ASSET # 5-464

START TIME:

905

FINISH TIME:

910

| CHECK POINT | CHECKPOINT DESCRIPTION | TEST/COMPLIANCE | | SPECIAL INSTRUCTIONS | NOTES/REMARKS |
|---|--|-----------------|----|----------------------|---------------|
| | | 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. | | | | |
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To be performed by: HVAC Technician

Additional Notes:

Set

Acc

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