

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: PA017 Date of Visit: 7/18/19

Contractor Personnel on Site:

1. Tony Lazaros
2. Scott Wiley
3. _____
4. _____
5. _____
6. _____

Work Performed:

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

1. 9876
2. 9927
3. 9959
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Lazaros Date: 7/18/19
Signed: Tony Lazaros

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: Bill Clark W69 Date: 18 7 2019

Signed: Bill Clark

E-Mail:

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

Facility/Building: Pro12-w1 Date of Visit: 2/2/18

Contractor Personnel on Site:

1. Tony Gross
2. Don Geertson
3. _____
4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 9847
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Gross Date: 2/2/18
Signed: Tony

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: Bill Clegg w69 Date: 18/7/2019
Signed: Bill Clegg

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
AIR COMPRESSOR

SITE AND BLDG #:

P-017 -02

MECHANIC
SIGNATURE:

DATE:

7/18/18

LOCATION/RM #:

Ans WO# 9727 ASSET # 6203

START TIME:

FINISH TIME:

0846

CHECK POINT	CHECK POINT DESCRIPTION	TASK COMPLETED		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 to.		✓	
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	Perform normal tour checks and operations. 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 for corrosion and scale on water cooled units.	✓		
8	Clean heat exchange surfaces.	✓		
9	Check accuracy of gauges with calibrated test gauge.	✓		
10	On two stage compressor, check intermediate pressure.	✓		
11	Test relief valves, replace if leaking or the relief range is incorrect. 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.	✓		150 131
14	Check if air compressor is running excessively or frequently cycling on and off (possible leaks).	✓		

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: