

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: PA053-01 Date of Visit: 8/14/19

Contractor Personnel on Site:

- | | |
|-------------------|----------|
| 1. <u>Scott K</u> | 3. _____ |
| 2. <u>Dom S</u> | 4. _____ |

Work Performed:

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

- | | |
|----|----------------------------------|
| 1. | <u>WO 10247 FILTERS</u> |
| 2. | <u>10337 FILTERS</u> |
| 3. | <u>10419 ICE MACHINE, FRIDGE</u> |
| 4. | <u>WATER HEATERS</u> |
| 5. | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott KENDERS Date: 8/14/19

Signed: Scott Kenders

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: AL MOYANICKI Date: 8/14/19

Signed: Al Moynicki

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST Filter Replacement

SITE AND BLDG #: PA053

MECHANIC SIGNATURE: SK

DATE: 8/14/19

LOCATION/RM #: 103

START TIME: 830

FINISH TIME: 840

Site Location	W/O #	Asset #	PM #	Manufac turer	Model Number	Serial #	Asset Description	Asset Location
	10337	4629-1	Am-mo4629	Caprice				

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
1	Check, clean, and/or replace both internal and external filters as necessary.	✓		
2	Label and Date Filter	✓		
3	Did YELLOW Maintenance Tag get Initialed	✓		Make sure YELLOW Maint Tag is initialed on Asset
3	Did all High Asset Filters get Changed	✓		
Qty	Size			NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
1	MEDICA PAD			

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: **GMW Additional Notes:**

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **REACH-IN REFRIGERATORS/ FREEZERS**

SITE AND BLDG #: Pa053-01MECHANIC SIGNATURE: DATE: 8-14-19LOCATION/RM #: Kitchen WO# 10419 ASSET # 6899START TIME: 8:30FINISH TIME: 8:40

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO. PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Review manufacturer's instructions.	<input checked="" type="checkbox"/>		
2	De-energize, lock out, and tag electrical circuits.	<input checked="" type="checkbox"/>		
3	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.	<input checked="" type="checkbox"/>		
4	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.	<input checked="" type="checkbox"/>		
5	Closely follow all safety procedures described in the Safety Data Sheet (SDS) for the refrigerant and to all labels on refrigerant containers.	<input checked="" type="checkbox"/>		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	<input checked="" type="checkbox"/>		
2	Verify indicator light on; check compartment temperature.	<input checked="" type="checkbox"/>		
3	Examine evaporator for proper clearances/slope and air flow.	<input checked="" type="checkbox"/>		
4	Examine handles, hinges and tightness of door closure.	<input checked="" type="checkbox"/>		
5	Examine safety door release and fan shut down safety switch.	<input checked="" type="checkbox"/>		
6	Inspect lighting for burnt out lamps.	<input checked="" type="checkbox"/>		
7	Check starter panels and controls for proper operation, burned or loose contacts, and loose connections.	<input checked="" type="checkbox"/>		
8	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).	<input checked="" type="checkbox"/>		
9	Clean condenser coil and condensing unit section.	<input checked="" type="checkbox"/>		
10	Clean and inspect defrost evaporation trays/pans.	<input checked="" type="checkbox"/>		
11	Inspect defrost systems for proper operation, including timer; adjust as required. Have automatic defrosters adjusted as required so freezer will defrost during "Off Peak" hours	<input checked="" type="checkbox"/>		
12	Check operation of thermostats; calibrated as required.	<input checked="" type="checkbox"/>		
13	Check coil superheat and adjust to manufacturers recommendations.	<input checked="" type="checkbox"/>		

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **DOMESTIC HOT WATER HEATER - GAS**

SITE AND BLDG #:

Pa053-01

MECHANIC
SIGNATURE:


DATE:

8-14-19

LOCATION/RM #:

W01K WO# 10419

ASSET # 6963

START TIME:

10:10

FINISH TIME:

10:20

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 to.	✓		no service valves to flush units
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.	✓		
3	Use caution when working with natural gas fired equipment. Be aware of any smells (rotten egg) that could be a natural gas leak.	✓		
4	Do not allow any open flames around equipment.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Attach drain hose. Drain several gallons from tank to remove sediment.	✓		
2	Manually check operation of safety valve. Check for corrosion around valve. Verify the safety valve inspection tag is in place. Ensure that no personnel are in area of relief piping discharge.	✓		
3	Check all connections - electric, gas and water. Tighten as necessary.	✓		
4	Check operation and setting of aquastat. Check hot water temperature with dial thermometer, and set aquastat at minimum value required for all uses.	✓		
5	Drain storage and expansion tanks, and flush to remove sediment, scale, and solid at bottom of tank.	✓		
6	Clean sight glasses on tanks.	✓		
7	Clean strainer, check condition of traps. Report and repair leaks.	✓		
8	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.	✓		
9	If applicable, Remove and inspect Anode, replace if necessary	✓		
10	Clean up work area and remove trash.	✓		

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.

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **DOMESTIC HOT WATER HEATER - GAS**

SITE AND BLDG #: PA053-01MECHANIC
SIGNATURE: DATE: 8-14-19LOCATION/RM #: 6014 WO# 16419 ASSET # 6962START TIME: 10FINISH TIME: 10:10

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 to.	✓		no service valves to flush units
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.	✓		
3	Use caution when working with natural gas fired equipment. Be aware of any smells (rotten egg) that could be a natural gas leak.	✓		
4	Do not allow any open flames around equipment.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Attach drain hose. Drain several gallons from tank to remove sediment.	✓		
2	Manually check operation of safety valve. Check for corrosion around valve. Verify the safety valve inspection tag is in place. Ensure that no personnel are in area of relief piping discharge.	✓		
3	Check all connections - electric, gas and water. Tighten as necessary.	✓		
4	Check operation and setting of aquastat. Check hot water temperature with dial thermometer, and set aquastat at minimum value required for all uses.	✓		
5	Drain storage and expansion tanks, and flush to remove sediment, scale, and solid at bottom of tank.	✓		
6	Clean sight glasses on tanks.	✓		
7	Clean strainer, check condition of traps. Report and repair leaks.	✓		
8	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.	✓		
9	If applicable, Remove and inspect Anode, replace if necessary	✓		
10	Clean up work area and remove trash.	✓		

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.

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO. PROVIDE EXPLANATION)
		YES	NO	
14	Inspect and service all electric motors.	✓		
15	Inspect door gaskets for damage and proper fit; adjust gaskets as required and lubricate hinges with food grade oil.	✓		
16	Check door gasket heater.	✓		
17	Check box floor for water or ice accumulation.	✓		
18	Check box for excessive ice build- up and open seams.	✓		

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To be performed by: General Maintenance Worker

Additional Notes: