

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: Pro53-01,02 Date of Visit: 5/13/19

Contractor Personnel on Site:

1. Scott Wehrly
2. GARY BEITZEL
3. _____

4. _____
5. _____
6. _____

Work Performed:

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

1. 6820, 6899, 2346, 5042, 3412
2. _____
3. Walt 8635, 8785, 8274
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Wehrly Date: 5/13/19
Signed: Scott Wehrly

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: Civ Anita Moore Date: 20190513
Signed: Anita Moore
E-Mail: _____

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

FacID/Building: PA053-01 Date of Visit: 5/13/19

Contractor Personnel on Site:

1. SCOTT HERRY
2. GARY Beitzel
3. _____
4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 7438 WS + 8578
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Herry Date: 5/13/19
Signed: Scott Herry

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: Civ Anita Moore Date: 20190513
Signed: Anita Moore

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
ICE MAKER

SITE AND BLDG #: *PA53-01*LOCATION/RM #: *Kitchen*WO# *8635* ASSET # *6820*MECHANIC
SIGNATURE:*Harry Becto*

DATE:

5/13/19

START TIME:

9:30

FINISH TIME:

10:00

CHECK ITEM	CHECKPOINT DESCRIPTION	DRAIN CONDITION	NOTES / ACTIONS	
			YES	NO
1	Review manufacturer's instructions.			
2	De-energize, lock out, and tag electrical circuits.			
3	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.			
4	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.		<i>MR</i>	<i>MP</i>
5	Only approved cleaning chemicals shall be used.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.			
2	Visually check for refrigerant, oil and water leaks.			
3	Inspect ice condition/size.			
4	As needed, drain and clean unit with proper ice machine cleaning solution.			
5	Check date on water filter, Replace as needed. Water filters should be changed annually at a minimum.			
6	Check and tighten any loose screw-type electrical connections.			
7	Check all controls; adjust if necessary.			
8	Examine water connection; open and close water valve; test ice dispensing valve and (door) metering adjustment.			
9	Check and clear ice machine draining system (drain vent, strainer, trap).			
10	Examine condition of bin doors-closure, hinges, gaskets, handles and ease of slide; lubricate as required. Check storage bin condition.			
11	Clean motor, compressor, and condenser coil.			

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:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
REACH-IN REFRIGERATORS/ FREEZERS

SITE AND BLDG #: PA053-01

LOCATION/RM #: Kitchen WO# 8635

ASSET # 6899

MECHANIC
SIGNATURE:

Gary Bentz

DATE:

5/13/19

START TIME: 10:00

FINISH TIME:

10:30

CHECKPOINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
1	Review manufacturer's instructions.		/	
2	De-energize, lock out, and tag electrical circuits.		/	
3	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.		/	
4	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.		/	
5	Closely follow all safety procedures described in the Safety Data Sheet (SDS) for the refrigerant and to all labels on		/	
1	Check with operating or area personnel for any deficiencies; verify cleaning program.		/	
2	Verify indicator light on; check compartment temperature.		/	
3	Examine evaporator for proper clearances/slope and air flow.		/	
4	Examine handles, hinges and tightness of door closure.		/	
5	Examine safety door release and fan shut down safety switch.		/	
6	Inspect lighting for burnt out lamps.		/	
7	Check starter panels and controls for proper operation, burned or loose contacts, and loose connections.		/	
8	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).		/	
9	Clean condenser coil and condensing unit section.		/	
10	Clean and inspect defrost evaporation trays/pans.		/	

- 1 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
- 2 Check operation of thermostats; calibrated as required.
- 3 Check coil superheat and adjust to manufacturers recommendations.
- 4 Inspect and service all electric motors.
- 5 Inspect door gaskets for damage and proper fit; adjust gaskets as required and lubricate hinges with food grade oil.
- 6 Check door gasket heater.
- 7 Check box floor for water or ice accumulation.
- 8 Check box for excessive ice build-up and open seams.



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 description of the deficiency. To be performed by: General Maintenance Worker
 Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
TIME CLOCK, LIGHTING

SITE AND BLDG #: PA053-01

LOCATION/RM #: Boiler room

WO# 8635

ASSET # 2346

MECHANIC
SIGNATURE: *Mark May*

DATE: 5/13/19

START TIME: 9:45

FINISH TIME: 10:00

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.	✓		
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	Clean timeclock using a soft lint-free cloth and spray bottle of glass cleaner. Remove any dirt or grease build up.	✓		
2	Check physical connections.	✓		
3	Verify the timeclock configuration, ensure proper operation.	✓		
4	If applicable, check battery and replace 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 description of the deficiency.
 To be performed by: General Maintenance Worker
 Additional Notes: