

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: Pa 067

Date of Visit: 8/26/19

Contractor Personnel on Site:

1. Tony Lazarus
2. Scott Werry
3. Jim Goertzen

- 4.
- 5.
- 6.

Work Performed:

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

1. 10290
2. 10483
3. 10249
4. 10463

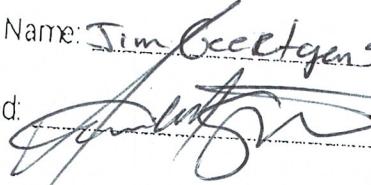
CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Goertzen

Date: 8-26-19

Signed:



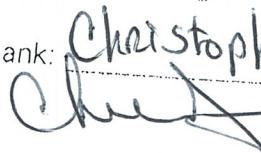
To be signed by Facility Manager:

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: Christopher Zeeb Q509

Date: 20190826

Signed:



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

FacID/Building: La 061-01 Date of Visit: 8/26/18

Contractor Personnel on Site:

1. Tony Lizaru
2. J.M Goertzen
3. Scott Berry
4. _____
5. _____
6. _____

Work Performed:

Other Recurring Services

1. 103rf
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Lizaru Date: 8/26/18
Signed: Tony Lizaru

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: Christopher Zure 6509 Date: 20190826
Signed: Christopher Zure
E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
DOMESTIC HOT WATER HEATER - GAS

SITE AND BLDG #: *Pro 67-02*LOCATION/RM #: *8m*WO# *10463*ASSET # *6980*MECHANIC
SIGNATURE: *[Signature]*DATE: *8/26/12*START TIME: *1230*FINISH TIME: *160*

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		✓	
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.		✓	
5	Attach drain hose. Drain several gallons from tank to remove		✓	
6	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.		✓	
7	Check all connections - electric, gas and water. Tighten as necessary.		✓	
8	Check operation and setting of aquastat. Check hot water temperature with dial thermometer, and set aquastat at		✓	120°
9	Drain storage and expansion tanks, and flush to remove sediment, scale, and solid at bottom of tank.		✓	
10	Clean sight glasses on tanks.		✓	
	Clean strainer, check condition of traps. Report and repair leaks.		✓	
	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.		✓	

K00-048CMI Management Inc.

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 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:

BK