

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

FACID/Building: Pr 079

Date of Visit: 7/22/19

Contractor Personnel on Site:

1. Tony Gerecus
2. Jim Goetges
3. _____
4. _____
5. _____
6. _____

Work Performed:

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

1. 9906
2. 9734
3. 9963
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

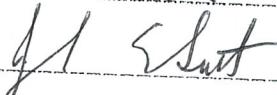
Print Name: Jim Goetges Date: 7-22-19

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: Josh Sutton / GS-11 Date: 22 Jul 19

Signed: 

E-Mail:

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

FacID/Building: Pr 079-01 Date of Visit: 7/22/19

Contractor Personnel on Site:

1. Tony Czerwos
2. Scott Werry
3. _____
4. _____
5. _____
6. _____

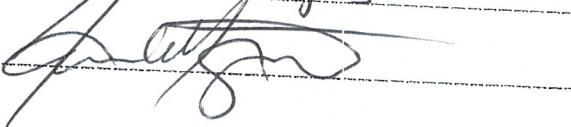
Work Performed:

Other Recurring Services

1. 9810
2. _____
3. _____
4. _____

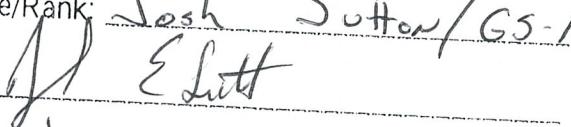
CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tim Czerwos Date: 7-22-19
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: Josh Sutton/GS-11 Date: 22 Jul 19
Signed: 

E-Mail: joshua.e.sutton2.civ@mail.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
AIR COMPRESSOR

SITE AND BLDG #: *Pr 078-02*LOCATION/RM #: *0m1*WO# *P734*ASSET # *6712*MECHANIC
SIGNATURE: *John Johnson*DATE: *7/22/18*START TIME: *830*FINISH TIME: *845*

CHECK POINT	CHECKPOINT DESCRIPTION	SPECIAL INSTRUCTIONS	BASIC / 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.			/	
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.			/	
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: