

ATTACHMENT J-0200000-05
FORMS

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

FACID/Building: WU 038

Date of Visit: 9/4/19

Contractor Personnel on Site:

1. Scott Werry

2. _____

3. _____

4. _____

5. _____

6. _____

Work Performed:

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

1. 10929

2. 10930

3. _____

4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Werry

Date: 9/4/19

Signed: Scott Werry

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: Samuel A. SSG

Date: 20190904

Signed: SSR

E-Mail:

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

FacID/Building: W0 030 Date of Visit: 9/4/19

Contractor Personnel on Site:

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

Work Performed:

Other Recurring Services

1. 10729
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Scott Werry Date: 9/4/19
Signed: Scott Werry

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: Samuel Hassell SSG Date: 20190904
Signed: SPR

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FAN COIL UNIT/ DUCTLESS MINI SPLIT

SITE AND BLDG #: WV 038-02

LOCATION/RM #: GARAGE WO# 10930

ASSET # 5102

MECHANIC
SIGNATURE:

START TIME: 9:30

DATE:

9/4/19

FINISH TIME: 9:45

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	Schedule shutdown with operating personnel, as needed.	✓		
3	As needed, de-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work. Follow lock out/tag out procedures at all times.	✓		
1	Check fan blades for dust buildup and clean if necessary.	✓		
2	When applicable, check fan blades and moving parts for cracks and excessive wear.	✓		
3	Tighten all electrical connectors to proper torque as needed.	✓		
4	Check that the fan runs properly in all speeds as applicable.	✓		
5	Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary. Check felt, repair or replace as necessary.	✓		
6	Check damper actuators and linkage for proper operation as applicable. Adjust linkage on dampers if out of alignment.	✓		
7	Lubricate mechanical connections of dampers sparingly as applicable.	N/A		
8	Check the valve(s) for signs of leakage and proper operation. If leak is detected, submit a UE.	✓		
9	Clean coils by brushing, blowing, vacuuming, or pressure washing.	✓		
10	Check coils for leaking, tightness of fittings.	✓		
11	Use fin comb to straighten coil fins as needed.	✓		

K00-046CMI Management Inc.

- Check belts for wear and cracks, adjust tension or alignment as applicable. Replace belts when necessary. *N/A*
- Check rigid couplings for alignment on direct drives, and for tightness of assembly. *✓*
- Vacuum interior of unit. *✓*
- Check filter door for proper gasketing and air leaks. Correct as necessary. *✓*
- Change the filter as needed with the correct size and type filter. *✓*
- Ensure that drain(s) are clear and running. *✓*
- Clean up work area. *✓*

WASHED

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:

Unit is old and in bad shape
Should be replaced.