

CERTIFICATION OF WORK

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

FACID/Building: WV043

Date of Visit: 6/21/19

Contractor Personnel on Site:

- | | |
|------------------------|----------|
| 1. <u>Tony Green</u> | 4. _____ |
| 2. <u>Jim Geertzen</u> | 5. _____ |
| 3. <u>Scott Berry</u> | 6. _____ |

Work Performed:

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

- | | |
|----------------|-------------|
| 1. <u>9170</u> | <u>9357</u> |
| 2. <u>9177</u> | <u>9473</u> |
| 3. <u>9408</u> | _____ |
| 4. <u>9166</u> | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertzen

Date: 6-21-19

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: SSG Rose, Benjamin A

Date: 21 Jun 2019

Signed: _____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST UNIT HEATER, INFRA-RED, RADIANT, GAS

SITE AND BLDG #:

WU043-02

LOCATION/RM #:

OMS

WO#

9473

ASSET #

4510

MECHANIC
SIGNATURE:

[Signature]

START TIME:

145

DATE:

2/21/19

FINISH TIME:

153

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	For gas/oil heaters:			
	1. Remove access panels if applicable.			
	2. Check the fire box liner or refractory for cracks and leaks.			
	3. Check all gas lines for leaks. Repair as needed.			
	Clean dirt from heater, vacuuming is preferred.			
	Check operation of gas valve.			
	Check for gas leaks.			
	Check operation of thermostat.			
	If applicable, replace primary air intake filter.			
	As needed, clean spark electrode and reset gap, replace if necessary.			
	Inspect flue pipe and connections.			
	If applicable, inspect and clean outside air blower and blower intake.			
	Inspect unit for proper operation.			
	Inspect unit for overall condition and recommend for replacement or other needed repairs.			

Note The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For

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PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST UNIT HEATER, INFRA-RED, RADIANT, GAS

SITE AND BLDG #: **WU043 -02**

LOCATION/RM #: **GM**

WO# **9473**

ASSET # **4576**

MECHANIC
SIGNATURE: *[Signature]*

START TIME: **145**

DATE: **6/21/18**

FINISH TIME: **153**

CHECKPOINT	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.

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 - 3 Check all gas lines for leaks. Repair as needed.
- 2 Clean dirt from heater, vacuuming is preferred.
- 3 Check operation of gas valve.
- 4 Check for gas leaks.
- 5 Check operation of thermostat.
- 6 If applicable, replace primary air intake filter.
- 7 As needed, clean spark electrode and reset gap, replace if necessary.
- 8 Inspect flue pipe and connections.
- 9 If applicable, inspect and clean outside air blower and blower intake.
- 10 Inspect unit for proper operation.
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