

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

FACID/Building: Gaithersburg MD013 Date of Visit: 11/1/18

Contractor Personnel on Site:

- |                           |          |
|---------------------------|----------|
| 1. <u>Patrick Donovan</u> | 4. _____ |
| 2. _____                  | 5. _____ |
| 3. _____                  | 6. _____ |

**Work Performed:**

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

5. LIST WORK: AHR handler filters, DX Chiller, Water heater, Dehumidifier
6. Furnace, Condensing unit.
8. W.O.#s 6384, 6382, 6351

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Donovan Date: 11/1/18

Signed: [Signature]

To be signed by Facility Manager or Government Official

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name Rank: Glenn R. Umberger Jr, GS-13 Date: 1 Nov 18

Signed: [Signature]

E-Mail: glenn.r.umberger.civ@mil.mil

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **DOMESTIC HOT WATER HEATER - GAS**

SITE AND BLDG #: Greethersburg MD 2013MECHANIC SIGNATURE: [Signature]DATE: 11/1/18LOCATION/RM #: Mechanical Room 6351ASSET # 1528 #01 + 8START TIME: 12:15FINISH TIME: 12:40

SPECIAL INSTRUCTIONS			
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.	<input checked="" type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	<u>Sign and dated Maint Record Tag</u>
3	Use caution when working with natural gas fired equipment. Be aware of any smells (rotten egg) that could be a natural gas leak.	<input checked="" type="checkbox"/>	
4	Do not allow any open flames around equipment.	<input checked="" type="checkbox"/>	
<b>TO BE PERFORMED BY A LICENSED SERVICE TECHNICIAN</b>			
1	Attach drain hose. Drain several gallons from tank to remove sediment.	<input checked="" type="checkbox"/>	<u>1 done</u>
2	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.	<input checked="" type="checkbox"/>	<u>Good</u>
3	Check all connections - electric, gas and water. Tighten as necessary.	<input checked="" type="checkbox"/>	<u>Good</u>
4	Check operation and setting of aquastat. Check hot water temperature with dial thermometer, and set aquastat at minimum value required for all uses.	<input checked="" type="checkbox"/>	<u>Good</u>
5	Drain storage and expansion tanks, and flush to remove sediment, scale, and solid at bottom of tank.	<input checked="" type="checkbox"/>	<u>done</u>
6	Clean sight glasses on tanks.	<input checked="" type="checkbox"/>	<u>all sight glass</u>
7	Clean strainer, check condition of traps. Report and repair leaks.	<input checked="" type="checkbox"/>	<u>Strainer good</u>
8	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.	<input checked="" type="checkbox"/>	<u>done</u>
9	If applicable, Remove and inspect Anode, replace if necessary	<input checked="" type="checkbox"/>	<u>Good</u>
10	Clean up work area and remove trash.	<input checked="" type="checkbox"/>	<u>done</u>

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:**