

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE007 Date of Visit: 03/25/22

Contractor Personnel on Site:

- |          |          |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

**Work Performed:**

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

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

73

45

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 03/25/22

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: Lamontagne Date: 03/25/22

Signed: 

E-Mail: \_\_\_\_\_

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

### OUTDOOR CONDENSING UNIT

SITE AND BLDG #: DE007 B-4

MECHANIC  
SIGNATURE: 

DATE: 03/25/22

0Y4-072 - 081

LOCATION/RM #: WO# 16745 ASSET #

START TIME: 0900

FINISH TIME: 1630

| CHECK POINT                                | CHECKPOINT DESCRIPTION  | TASK COMPLETE |    | NOTES/ ACTIONS<br>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|--|---|---------------|----|---|
|  |   | YES           | NO |   |
| SPECIAL INSTRUCTIONS                       |   |               |    |   |
| 1  | Schedule outage of unit with personnel in area the unit serves.   | ✓             |    |   |
| 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. | ✓             |    |   |
| 3  | If disposal of the equipment is required, follow regulations concerning removal of refrigerants and disposal of the unit.                                   | ✓             |    |   |
| TO BE PERFORMED AT EACH INSPECTION SERVICE |   |               |    |   |
| 1  | Remove debris from air screen and clean underneath unit.  | ✓             |    |   |
| 2  | Wash coil with coil cleaning solution - Rinse Thoroughly  | ✓             |    |   |
| 3  | Straighten fin tubes with fin comb, as needed.  | ✓             |    |   |
| 4  | Check electrical connections for tightness.   | ✓             |    |   |
| 5  | Check mounting base for tightness.  | ✓             |    |   |
| 6  | Inspect fans for bent blades, unbalance, excessive noise and vibrations.  | ✓             |    |   |
| 7  | Inspect all piping for leaks and tighten loose connections.   | ✓             |    |   |
| 8  | Check wires at condenser electrical fused safety switches for tightness and burned insulation. Repair as necessary.   | ✓             |    |   |
| 9  | Check supply air temperature to ensure unit is operating properly. If possible record room temperature.and Humidity   | ✓             |    | Room temp _____ Room Humidity _____%                                    |
| 10   | Inspect unit for overall condition and recommend for replacement or other needed repairs.   | ✓             |    |   |
| 11   | Clean up work area.   | ✓             |    |   |

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: HVAC Technician

**Additional Notes:**