

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

FACID/Building: PA 079

Date of Visit: 12/19/18

Contractor Personnel on Site:

1. Tony Geregos
2. Jim Geregos
3. Scott Werry
4. Frank Sapienza
5. _____
6. _____

Work Performed:

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

1. 6514 6718
2. 6577
3. 6726
4. 6602

CERTIFICATION OF WORK

To be signed by the Contractor:

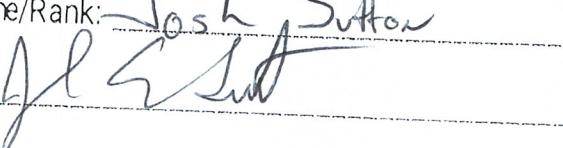
Print Name: Jim Geregos Date: 12-19-18

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 Date: 19 Dec 18

Signed: 

E-Mail:

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

FACTD/Building: Pa 079-01 Date of Visit: 12/19/18

Contractor Personnel on Site:

1. <u>Tony Lemos</u>	4. <u>Frank Sapienza</u>
2. <u>Jim Geertgens</u>	5. _____
3. <u>Scott Werry</u>	6. _____

Work Performed:

Other Recurring Services

1. <u>6463</u>
2. _____
3. _____
4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens Date: 12-19-18
Signed: Jim Geertgens

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: Tosh Sutton Date: 19 Dec 18
Signed: Tosh Sutton

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
UNIT HEATER, HOT WATER

SITE AND BLDG #: P 079 ~c,
LOCATION/RM #: Kitchen WO# 6726 ASSET # 4356

MECHANIC SIGNATURE:

START TIME:

DATE:

12/12/18

FINISH TIME: 953

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETED		NOTES/ACTIONS (IF TASK COMPLETE IS CHECKED AG 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.	/		
3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	/	/	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check valve for full stroke operation in both directions, if applicable.	/		
2	Check valve for signs of abnormal wear and leaks. Replace packing if needed.	/		
3	Clean the coil with vacuum cleaner.	/		
4	Comb the fins as needed.			
5	Clean all fans and motors.		N/A	
6	Check operation of controls and safeties.	/		
7	Lubricate as required.	/		
8	Check all motors, belts, pulleys, shafts, etc. for alignment.	/		

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:

65° set point

1 PC

99° Air coming out.