

CERTIFICATION OF WORK

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

FACID/Building: PA66

Date of Visit: 12-21-18 - 12-19, 12-18

Contractor Personnel on Site:

- | | |
|---------------------|----------|
| 1. <u>Kan Kaise</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed: December 2018 Preventative maintenance,

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

- | |
|--|
| 1. <u>WPH# 6535, 6653, 6540, 6607,</u> |
| 2. <u>6678, 6712 6698</u> |
| 3. _____ |
| 4. _____ |

Inspection, Testing, and Certification

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

Other Recurring Services

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

Service Calls -- Service Call Number and Description

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

Over and Above Repair Work – Order Number and Description of Work Completed

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ken Kaizer Date: 12-21-18

Signed: [Signature]

To be signed by Facility Manager:

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: TIMOTHY S PETERS Date: 21 DEC 18

Signed: [Signature]

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST UNIT HEATER, ELECTRIC

SITE AND BLDG #:

MECHANIC
SIGNATURE:

DATE:

LOCATION/RM #:

WO# 6698 ASSET # 4772

START TIME:

FINISH TIME:

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|---|--|-------------------------------------|----|---|
| | | YES | NO | |
| 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"/> | | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 1 | Check heater coils and associated piping for leaks or corrosion. | <input checked="" type="checkbox"/> | | |
| 2 | Clean heating coil. Brush vacuum where accessible. | <input checked="" type="checkbox"/> | | |
| 3 | Inspect wiring and electrical controls for loose connections, charred, frayed or broken insulation, evidence of short circuiting, wrong size fuses, circuit breakers, or switches, and other electrical deficiencies. Tighten any loose connections. | <input checked="" type="checkbox"/> | | |
| 4 | Inspect fan for bent blades, unbalance, excessive noise and vibration. | <input checked="" type="checkbox"/> | | |
| 5 | Check motor and fan shaft bearings for noise, vibration, overheating; lubricate bearings. | <input checked="" type="checkbox"/> | | |
| 6 | Verify proper control by modulating the thermostat through complete cycle. | <input checked="" type="checkbox"/> | | |
| 7 | Inspect unit for proper operation. | <input checked="" type="checkbox"/> | | |
| 8 | Inspect unit for overall condition and recommend for replacement or other needed repairs. | <input checked="" type="checkbox"/> | | |

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:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST UNIT HEATER, ELECTRIC

SITE AND BLDG #: PA16-6BMECHANIC
SIGNATURE: *[Signature]*

DATE: .

LOCATION/RM #: _____ WO# 6698 ASSET # 4178

START TIME: _____

FINISH TIME: _____

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|--|--|---------------|----|---|
| | | YES | NO | |
| 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. | ✓ | | |
| 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. | ✓ | | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 1 | Check heater coils and associated piping for leaks or corrosion. | ✓ | | |
| 2 | Clean heating coil. Brush vacuum where accessible. | ✓ | | |
| 3 | Inspect wiring and electrical controls for loose connections, charred, frayed or broken insulation, evidence of short circuiting, wrong size fuses, circuit breakers, or switches, and other electrical deficiencies. Tighten any loose connections. | ✓ | | |
| 4 | Inspect fan for bent blades, unbalance, excessive noise and vibration. | ✓ | | |
| 5 | Check motor and fan shaft bearings for noise, vibration, overheating; lubricate bearings. | ✓ | | |
| 6 | Verify proper control by modulating the thermostat through complete cycle. | ✓ | | |
| 7 | Inspect unit for proper operation. | ✓ | | |
| 8 | 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 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: