

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

FACID/Building: MD006

Date of Visit: 12/4/18

Contractor Personnel on Site:

- |                         |                          |
|-------------------------|--------------------------|
| 1. <u>Tony Lazzarus</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>6520</u> | <u>6710</u> |
| 2. <u>6561</u> | <u>6644</u> |
| 3. <u>6640</u> | _____       |
| 4. <u>6598</u> | _____       |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens

Date: 12-4-18

Signed: [Signature]

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: Jesse Schultz, ARA

Date: 2018/2/04

Signed: Jesse Schultz

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

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

FACID/Building: MD 006

Date of Visit: 12/4/18

Contractor Personnel on Site:

- |                         |                          |
|-------------------------|--------------------------|
| 1. <u>Tony Lazzari</u>  | 4. <u>Frank Sapienza</u> |
| 2. <u>Jim Geertgens</u> | 5. _____                 |
| 3. <u>Scott Werny</u>   | 6. _____                 |

Work Performed:

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

1. 6488
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geertgens

Date: 12-4-18

Signed: [Signature]

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: Jesse Schultz ARA

Date: 2018/12/04

Signed: Jesse Schultz

E-Mail:

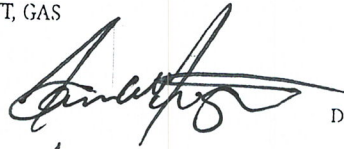
**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
 UNIT HEATER, INFRA-RED, RADIANT, GAS

SITE AND BLDG #:

MD 006-02

MECHANIC

SIGNATURE:



DATE:

12/4/15

LOCATION/RM #:

Molokai Pool

WO#

6710

ASSET #

4234

START TIME:

100

FINISH TIME:

110

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.	/		
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.	/		NA
8	Inspect flue pipe and connections.	/		
9	If applicable, inspect and clean outside air blower and blower intake.	/		
10	Inspect unit for proper operation.	/		
11	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



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

SITE AND BLDG #: MD 006-02

MECHANIC  
SIGNATURE: 

DATE: 12/4/18

LOCATION/RM #: 0m5 WO# 6710 ASSET # 4235

START TIME: 120

FINISH TIME: 130

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.	/		
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.	/		NA
8	Inspect flue pipe and connections.	/		
9	If applicable, inspect and clean outside air blower and blower intake.	/		
10	Inspect unit for proper operation.	/		
11	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

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST UNIT HEATER, ELECTRIC

SITE AND BLDG #: MD 006 - 02

MECHANIC  
SIGNATURE: *[Signature]*

DATE: 12/4/18

LOCATION/RM #: Motor Room WO# 6710

ASSET # 4484

START TIME: 130

FINISH TIME: 145

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	Check heater coils and assoicated piping for leaks or corrosion.		—	
2	Clean heating coil. Brush vaccum 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, vibraton, 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 exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed discription of the deficiency.  
to be performed by: HVAC Technician