CERTIFICATION OF WORK

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

FACID/Building: Gaithersburg MD013 Date of Visit: 5/20/19

Contractor Personnel on Site:

1. Patrick Donovan 2. _____

Work Performed:

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

1. 8485, 8515, 8546, 8516, 8547,

Service Calls – Service Call Number and Description

1. CSS#_____
2. CSS#_____
3. CSS#_____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Donovan Date: 5/20/19

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: _____ Date: _____

Signed: _____

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
DEHUMIDIFIER

SITE AND BLDG #: Gaithersburg MD013 MECHANIC SIGNATURE: [signature] DATE: 5/20/19

LOCATION/RM #: Arms Vault WO# 8545 ASSET # 1528 START TIME: 12:15 FINISH TIME: 12:25

should be asset #1998

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES	TASK COMPLETE NO	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
	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.	✓		
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 water inlet and outlet for any leaks, repair as needed.	✓		Good
2	Clean and/or replace filter as needed.	✓		Good
3	If applicable, check hours per usage, replace tanks's as needed.		N/A	

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 discription of the deficiency.

To be perfomed by: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
AIR HANDLER

SITE AND BLDG #: Gaithersburg MD013 Mechanical Room
MECHANIC SIGNATURE: [signature]
DATE: 5/20/19
LOCATION/RM #: WO# 8515 ASSET # 1988
START TIME: 11:40
FINISH TIME: ~~12:00~~ 12:10

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES	TASK COMPLETE NO	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
	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	Remove power at Drive or at Breaker Panel. Verify with tester or meter that power has been removed. Install lock out tag out if servicing alone or in confined space for safety precautions.			
	TO BE PERFORMED AT EACH INSPECTION SERVICE			
1	Check fan blades and moving parts for cracks and excessive wear.	✓		Done
2	Check running motor amperatures on all three phases (record in note column) notate L1, L2, and L3 amp draws.	✓		L1 7.7 L2 7.6 L3 7.7
3	Tighten all electrical connectors/lugs to proper torque.	✓		Done
4	If unit is a multi-zone air handler, then check each individual zone damper and associated controls.		N/A	
5	Check bearing collar set screws on fan shaft to make sure they are tight.	✓		Good
6	Check filters for dirt accumulations, replace as necessary. Check belt, repair or replace as necessary.	✓		Changed out on 4/24/19
7	Check damper actuators and linkage for proper operation. Adjust linkage on dampers if out of alignment.	✓		good
8	Lubricate mechanical bearings and connections sparingly.	✓		Done
9	Clean coils by brushing, blowing, vacuuming, or pressure washing.	✓		Done
10	Check coils for leaking, tightness of fittings.	✓		No leaks detected
11	Use fin comb to straighten coil fins.	✓		down
12	If applicable, clean strainer (annually).		N/A	
13	Flush and clean condensate pans and drains, remove all rust prepare metal and paint. Hose down coils and drain pans and wash with an appropriate EPA approved solution approved solution. Treat condensate pans with an EPA approved biocide.	✓		Done

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES	TASK COMPLETE NO	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
14	Check belts for wear and cracks, adjust tension or alignment. Replace belts when necessary. Multi-belt drives shall only be replaced with matched sets.	✓		all good
15	Check rigid couplings for alignment on direct drives, and for tightness of assembly. Check flexible couplings for alignment and wear.	✓		good
16	Check and test freezestat for proper operation	✓		done/good
17	Vacuum interior of unit.	✓		done
18	Check filter doors and access doors for proper gasketing and air leaks. Correct as necessary.	✓		good
19	Lubricate fan shaft bearings while unit is running. Add grease slowly until slight bleeding is noted from the seals. Do not over lubricate. Remove old or excess lubricant.	✓		done
20	Clean up work area.	✓		done

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 discription of the deficiency.

To be perfomed by: HVAC Technician

Additional Notes: