

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

FACID Building: *Gaithersburg MD 2013* Date of Visit: *3/6/19*

Contractor Personnel on Site:

Patrick Donovan

1

4.

2

5.

3

6.

Work Performed:

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

- 5. FIRST WORK *7624, 7727, 7823, 7628, 7731, 7827*
- 6. *Grease Trap, Hot Water Pump, Baseboard radiators, Unit Heaters, Mini Splits, Condensing units, overhead Vehicle Exhaust systems,*
- 8.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: *Patrick Donovan*

Date: *3/6/19*

Signed: *[Signature]*

To be signed by Facility Manager or Government Official

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: *TARA STLAURENT*

Date: *3/6/19*

Signed: *[Signature]*

E-Mail: *TARA.F.STLAURENT.CN@mail.mil*

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

UNIT HEATER, HOT WATER

SITE AND BLDG #: Centerville 147013

MECHANIC
SIGNATURE

DATE: 3/9/19

LOCATION/RM #: 34 WO# 7727 ASSET# 19904#1991

START TIME: 1145

FINISH TIME: 2:25

CIRCUIT POINT	CHECKPOINT DESCRIPTION	TASK COMPLETION		NOTES/ACTIONS (Tasks completed are checked to indicate documentation)
		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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Schedule shutdown with operating personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1	Check valve for full stroke operation in both directions, if applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>all good</i>
2	Check valve for signs of abnormal wear and leaks. Replace packing if needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>good</i>
3	Clean the coil with vacuum cleaner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>good clean</i>
4	Comb the fins as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>good</i>
5	Clean all fans and motors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>Cleaned</i>
6	Check operation of controls and safeties.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7	Lubricate as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>good</i>
8	Check all motors, belts, pulleys, shafts, etc. for alignment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>all good</i>

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:

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

SITE AND BLDG #: Gaithersburg MD013

LOCATION/RM #: Mechanical Room **WO#** 7727 **ASSET #** 1997

MECHANIC John B. Lee **SIGNATURE:** John B. Lee **DATE:** 3/4/19

START TIME: 10:00 **FINISH TIME:** 10:20

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"/>			
1	For gas/oil heaters:				
1	1. Remove access panels if applicable.				
2	2. Check the fire box liner or refractory for cracks and leaks.				
3	3. Check all gas lines for leaks. Repair as needed.				
2	Clean dirt from heater. Vacuuming is preferred.	<input checked="" type="checkbox"/>			
3	Check operation of gas valve.	<input checked="" type="checkbox"/>			
4	Check for gas leaks.	<input checked="" type="checkbox"/>			
5	Check operation of thermostat.	<input checked="" type="checkbox"/>			
6	If applicable, replace primary air intake filter.	<input checked="" type="checkbox"/>			
7	As needed, clean spark electrode and reset gap, replace if necessary.	<input checked="" type="checkbox"/>			
8	Inspect flue pipe and connections.	<input checked="" type="checkbox"/>			
9	If applicable, inspect and clean outside air blower and blower intake.	<input checked="" type="checkbox"/>			
10	Inspect unit for proper operation.	<input checked="" type="checkbox"/>			
11	Inspect unit for overall condition and recommend for replacement or other needed repairs.	<input checked="" type="checkbox"/>			

Sign and dated Maintenance Record Tag

done good

good

No leaks detected

good

N/A

Good

Good

Good

Good

Good

Good

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: