

CERTIFICATION OF WORK

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

FACID/Building: *Upper Marlboro* Date of Visit: *5/21/19*
MD014

Contractor Personnel on Site:

1. *Patrick Donovan* 2. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)
8486

1. *8466, 8517, 8548, 8466, 8518, Flood lights, Water Heater, Sump Pump, AHU (Filters + PMs) Dehumidifier Freezer,*

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: *5/21/19*
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: *Parker Richard* Date: *28/05/21*

Signed: *[Signature]*

E-Mail: *Richard.L.Parker.8.CTD@md.gov*

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
SUMP PUMP

SITE AND BLDG #: Upper Marlboro WDOle
LOCATION/RM #: Mechanic Room **WO#** 8486 **ASSET #** 1536

**MECHANIC
SIGNATURE:** 

DATE:

5/21/19

START TIME: 10:10

FINISH TIME: 10:20

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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done
2	Schedule outage with operating personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done
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"/>	Done
4	If the material removed from the pump is hazardous, contact the Regional S&E:M office for disposal instructions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	If strainer cleaning requires removal of pump unit which should be considered a repair and not general maintenance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	Excessive sediment and debris, not removed by flushing the pit should be handled on a project basis, and not considered under this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done Sediment and debris removed
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Remove cover plates and flush pit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done
2	Inspect check valve.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done
3	Inspect interior of pit for cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done
4	Inspect cover plate gaskets and replace if necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done
5	Ensure the unit is operating properly, report any deficiencies	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Done/good
6	Clean up work area and remove all debris.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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 description of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes:

could not locate asset 1537 electric exterior sump pump

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
REACH-IN REFRIGERATORS/ FREEZERS

SITE AND BLDG #: Upper Mackino M2016 **MECHANIC SIGNATURE:** Bob **DATE:** 9/21/19

LOCATION/RM #: Kitchen WO# 8486 **ASSET #:** 1531 **START TIME:** 11:10 **FINISH TIME:** 11:15

ITEM	DESCRIPTION	NOTES	REASON FOR REPAIR	REASON FOR REPAIR
1	Review manufacturer's instructions.			
2	De-energize, lock out, and tag electrical circuits.			
3	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.			
4	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.			
5	Closely follow all safety procedures described in the Safety Data Sheet (SDS) for the refrigerant and to all labels on refrigerant containers.			
1	Check with operating or area personnel for any deficiencies; verify cleaning program.			
2	Verify indicator light on; check compartment temperature.			
3	Examine evaporator for proper clearances/slope and air flow.			
4	Examine handles, hinges and tightness of door closure.			
5	Examine safety door release and fan shut down safety switch.			
6	Inspect lighting for burnt out lamps.			
7	Check starter panels and controls for proper operation, burned or loose contacts, and loose connections.			
8	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).			
9	Clean condenser coil and condensing unit section.			
10	Clean and inspect defrost evaporation trays/pans.			
11	Inspect defrost systems for proper operation, including timer; adjust as required. Have automatic defrosters adjusted as required so freezer will defrost during "Off Peak" hours			
12	Check operation of thermostats; calibrated as required.			
13	Check coil superheat and adjust to manufacturers recommendations.			
14	Inspect and service all electric motors.			

Task	Description	Completed	Not Completed
15	Inspect door gaskets for damage and proper fit, adjust gaskets as required and lubricate hinges with food grade oil.		S
16	Check door gasket heater.		
17	Check box floor for water or ice accumulation.		
18	Check box for excessive ice build-up and open seams.		

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:

Kitchen
Condenser Unit
AC unit

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
DOMESTIC HOT WATER HEATER - ELECTRIC

SITE AND BLDG #: Upper Parkboro MP016 **MECHANIC SIGNATURE:** John P. B. **DATE:** 5/21/19
LOCATION/RM #: Mechanical Room **WO #:** 8486 **ASSET #:** 1535 **START TIME:** 10:45 **FINISH TIME:** 11:05

		SPECIAL INSTRUCTIONS	TO BE PERFORMED AND MAINTENANCE SERVICE	SUGGESTED WORK TIME
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.			
3	Attach drain hose. Drain several gallons from tank to remove sediment.			
4	Manually check operation of safety valve. Check for corrosion around valve. Verify the safety valve inspection tag is in place. Ensure that no personnel are in area of relief piping discharge.			
5	Check all connections - electric and water. Tighten as necessary. Ensure power is disconnected to electric heaters prior to checking connections.			
6	Check operation/ setting of aquastat. Check hot water temperature with dial thermometer, set aquastat at minimum value required for all uses.			
7	Check amperage draw of upper and lower elements and compare to name plate data.			
8	Clean element contacts, and check for proper closing under load.			
9	Clean pump, controls, switches, and starters. Check condition of pump seal or packing, and replace as required.			
10	If applicable, Remove and inspect Anode, replace if necessary			
11	Clean up work area and remove trash.			

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: