

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

FACID Building: *Riverdale MD020* Date of Visit: *2/7/19*

Contractor Personnel on Site:

*Patrick Donovan*

8

4.

6.

5.

6.

Work Performed:

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

*8. FIRST WORK 7235*

*Water Heater, Photocell, Filters*

8

**CERTIFICATION OF WORK**

To be signed by the Contractor:

*Patrick Donovan*  
*Pat*

Date: *2/7/19*

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: *Clayton A. White, LTC* Date: *07 Feb 19*

*Clayton A. White*  
*clayton.a.white.mil@mail.mil*

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**DOMESTIC HOT WATER HEATER - GAS**

**SITE AND BLDG #:** Riverdale MD 2020  
**LOCATION/RM #:** Mechanical Room **WO#** 7235 **ASSET #** 1549

MECHANIC  
 SIGNATURE: John Doe DATE: 2/7/19

START TIME: 9:40 FINISH TIME: 10:15

		SPECIAL INSTRUCTIONS	TO BE PERFORMED AT EACH INSPECTION SURVEY
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"/>	<i>signed/dated Maintenance Record tag.</i>
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"/>	
3	Use caution when working with natural gas fired equipment. Be aware of any smells (rotten egg) that could be a natural gas leak.	<input checked="" type="checkbox"/>	
4	Do not allow any open flames around equipment.	<input checked="" type="checkbox"/>	
1	Attach drain hose. Drain several gallons from tank to remove sediment.	<input checked="" type="checkbox"/>	<i>done</i>
2	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.	<input checked="" type="checkbox"/>	<i>close tagged off good</i>
3	Check all connections - electric, gas and water. Tighten as necessary.	<input checked="" type="checkbox"/>	<i>done</i>
4	Check operation and setting of aquastat. Check hot water temperature with dial thermometer, and set aquastat at minimum value required for all uses.	<input checked="" type="checkbox"/>	<i>good</i>
5	Drain storage and expansion tanks, and flush to remove sediment, scale, and solid at bottom of tank.	<input checked="" type="checkbox"/>	<i>drained some water</i>
6	Clean sight glasses on tanks.	<input checked="" type="checkbox"/>	<i>done</i>
7	Clean strainer, check condition of traps. Report and repair leaks.	<input checked="" type="checkbox"/>	<i>done</i>
8	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.	<input checked="" type="checkbox"/>	<i>done</i>
9	If applicable, Remove and inspect Anode, replace if necessary	<input checked="" type="checkbox"/>	
10	Clean up work area and remove trash.	<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: General Maintenance Worker

**Additional Notes:**

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**LIGHTING, OUTSIDE** *Photocell*

SITE AND BLDG #: *Riversdale MD020*

MECHANIC  
 SIGNATURE: *John* DATE: *2/7/19*

LOCATION/RM #: *Exterior of Riverdale MD020* WO# *7235* ASSET # *1550*

START TIME: *9:15* FINISH TIME: *9:30*

ITEM	DESCRIPTION	SPECIAL INSTRUCTIONS		NOTES
		Y/N	Y/N	
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	Schedule and coordinate work with operating personnel.			
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.	✓		
1	Open and tag switch.	✓		
2	Inspect visual condition of wiring. Look for evidence of overheating.	✓		
3	Check for proper light operation.	✓		
4	Test operation of automatic switches/ time clock/ <del>photocell</del> if applicable.	✓		<i>None</i>
5	Inspect light pole and mounting devices for deficiencies.	✓		<i>Covered photocell with electric tape during day. Lights turned on after a few minutes</i>
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	✓		<i>None</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**

Filter Replacement

**SITE AND BLDG #:** *Rueckle MD220*

**MECHANIC SIGNATURE:** *John*

**DATE:** *2/7/19*

**LOCATION/RM #:** *Kitchen*

**START TIME:** \_\_\_\_\_ **FINISH TIME:** \_\_\_\_\_

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
MD220	1547			Maintenance	0802744	310018467	<i>Non Working Unit Asset</i>	<i>Kitchen</i>

1 Check, clean, and/or replace both internal and external filters as necessary.

*Unit not in Use!*

2 Label and Date Filter

*Make sure YELLOW Maint Tag is initialed on Asset*

3 Did YELL OW Maintenance Tag get Initialed

3 Did all High Asset Filters get Changed

*Asset not in use*

**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: GMW Additional Notes:

*Asset not in use.*

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**

Filter Replacement

MECHANIC

SIGNATURE: 

DATE: 2/7/19

SITE AND BLDG #: Riverdale M2020  
LOCATION/RM #: Drill Hall

START TIME: 10:35

FINISH TIME:

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
M2020		Site		4.0 Smith			Hangin' High Air Handlers in Drill Hall Drill Hall	

1 Check, clean, and/or replace both internal and external filters as necessary.



*Done*

2 Label and Date Filter



*Done*

3 Did YELL.OW Maintenance Tag get Initialed



*Make sure YELLOW Maint Tag is initialed on Asset*

3 Did all High Asset Filters get C Changed



*all filters were good*

**3 (x4) 20X20X2 (12 total for all 4 units)**

**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: GMW Additional Notes: