

CERTIFICATION OF WORK

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

FACID/Building: Rockville MDO21 Date of Visit: 11/7/19

Contractor Personnel on Site:

1. Patrick Donovan 2. _____

Work Performed:

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

1. 11116, 11150, 11174, 11206, 11117, 11151, 11175
Air handlers, Ice Makers, Refrigerators, Water Heaters, Cond. units, dehumidifier
Furnace
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: 11/7/19

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: Felix, Adrian SGT Date: 7 Nov 2019

Signed: [Signature]

E-Mail: adrian.l.felix2.mil@mail.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST DOMESTIC HOT WATER HEATER - ELECTRIC

SITE AND BLDG #:

Rockville MD 20821

MECHANIC SIGNATURE:



DATE: 11/5/13

LOCATION/RM #:

Bldg #2 Restroom

WO# 11151

ASSET # 1557

START TIME:

2:45

FINISH TIME:

3:00

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
1	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	Attach drain hose. Drain several gallons from tank to remove sediment.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	See notes
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 type="checkbox"/>	<input checked="" type="checkbox"/>	See notes
3	Check all connections - electric and water. Tighten as necessary. Ensure power is disconnected to electric heaters prior to checking connections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	all good
4	Check operation/ setting of aquastat. Check hot water temperature with dial thermometer, set aquastat at minimum value required for all uses.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	good
5	Check amperage draw of upper and lower elements and compare to name plate data.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	AMP READINGS L1 L2 See notes
8	Clean up work area and remove trash.	<input checked="" type="checkbox"/>	<input 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:

Small in line heater for a sink in lavatives.