

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

SITE AND BLDG #: NY023-319

MECHANIC SIGNATURE: *TW*

DATE: *12/18/18*

LOCATION/RM #:

START TIME:

FINISH TIME:

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
NY023-319	1613	9536	PM-SA-9536		B0636795 003196 012		J-08 9-pc Unit Heater, Gas Fired Radiant <i>unable to locate gas heaters</i>	

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
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.			hydronic heating (radiators)
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	For gas/oil heaters: 1. Remove access panels if applicable. 2. Check the fire box liner or refractory for cracks and leaks. 3. Check all gas lines for leaks. Repair as needed.			BUILDING OCCUPANTS SAY
2	Clean dirt from heater, vacuuming is preferred.			
3	Check operation of gas valve.			There is one zone for heating
4	Check for gas leaks.			upstairs too hot
5	Check operation of thermostat.			downstairs too cold

6	If applicable, replace primary air intake filter.			
7	As needed, clean spark electrode and reset gap, replace if necessary.			
8	Inspect flue pipe and connections.			
9	If applicable, inspect and clean outside air blower and blower intake.			
10	Inspect unit for proper operation.			
11	Inspect unit for overall condition and recommend for replacement or other needed repairs.			

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:**