

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY127 Date of Visit: 2/18/22

Contractor Personnel on Site:

1. PATRICK BROWN 3. _____
2. _____ 4. _____

Work Performed:

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

1. WO#'S , 15845 , 15868 , 15873 , 15852 , 15869 , 15874 ,
2. 15870 , 15875
3. ASSET#'S , 190917- , 646 , 648 , 649 , 653 , 654 , 656 , 657 ,
4. 661 , 684 , 602 , 621 , 644 , 724 , 712 , 687 , 729 , 732
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 2/18/22

Signed: 

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: LARS LUFFMAN Date: 2/18/22

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
OVEN

ACTIVITY AND BLDG #: **NY127 BLDG1**

MECHANIC
SIGNATURE: 

DATE: **2/18/22**

LOCATION/RM #: **kitchen** WO# **15845** ASSET # **190917-654** START TIME: **9:30am** FINISH TIME: **10am**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	✓	/	
2	De-energize, lock out, and tag electrical circuits and fuel service.	✓	/	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	✓	/	no deficiencies noted
2	Check all controls, mechanisms for proper operation; adjust as required.	✓	/	controls function properly
3	Examine utility supply line, piping, valve packing, specialties, and insulation; look for leaks.	✓	/	no leaks found
4	Check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.	✓	/	all are good
5	Check the operation of thermostats; calibrate if required	✓	/	thermostat is correct
6	Clean and adjust gas burners.	✓	/	gas burners burn correctly
7	Check safety pilot and solenoid.	✓	/	solenoid functions properly
8	Clean and adjust pilot light assembly.	✓	/	pilot light and assembly are good
9	Check flue for proper draft or obstructions.	✓	/	no obstructions
10	Lubricate gas valves.	✓	/	
11	Clean interior walls and elements to obtain maximum heat transfer.	✓	/	walls and elements are clean
12	Check gaskets and seals; check doors for tightness and warping; lubricate hinges and repair as necessary.	✓	/	gaskets and hinges are good
13	Examine handles, knobs and controls for tightness and safe condition.	✓	/	all are tight

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: