

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY127 Date of Visit: 2/17/22

Contractor Personnel on Site:

1. <u>PATRICK BROWN</u>	3. _____
2. _____	4. _____

**Work Performed:**

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

1. WO#'S, 15929 , 16265 ,16279 , 16280 , 15930 , 16243 ,
2. 16266 , 16281
3. ASSET#'S , 190917- , 615 , 616 , 636-640 , 683 , 709 , 724 ,
4. 703 , 707 , 710 , 711 , 714 , 716 , 700 , 708
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 2/17/22

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:

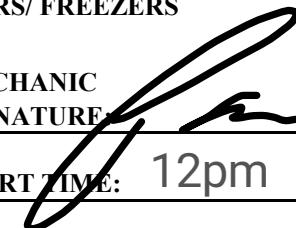
Print Name/Rank: LARS LUFFMAN Date: 2/17/22

Signed: 

E-Mail: \_\_\_\_\_

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**REACH-IN REFRIGERATORS/ FREEZERS**

SITE AND BLDG #: NY127 BLDG1

MECHANIC  
SIGNATURE: 

DATE: 2/17/22

LOCATION/RM #: kitchen WO# 16265

ASSET #  
190917-659,  
660

START TIME: 12pm

FINISH TIME: 12:30pm

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
1	De-energize, lock out, and tag electrical circuits.	✓	/	
2	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.	✓	/	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	✓	/	no deficiencies noted
2	Verify indicator light on; check compartment temperature.	✓	/	compartment temperature is correct
3	Examine evaporator for proper clearances/slope and air flow.	✓	/	evaporator slope is good
4	Examine handles, hinges and tightness of door closure.	✓	/	handles and hinges are good
5	Examine safety door release and fan shut down safety switch.	✓	/	switches function properly
6	Inspect lighting for burnt out lamps. Replace if required.	✓	/	no burnt out lamps
7	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).	✓	/	evaporator coil drain and pan are good
8	Clean condenser coil and condensing unit section.	✓	/	condensing coil is clean
9	Clean and inspect defrost evaporation trays/pans.	✓	/	trays are clean
10	Check operation of thermostats; calibrated as required.	✓	/	thermostat functions properly
11	Check coil superheat and adjust to manufacturers recommendations.	✓	/	superheat is correct
12	Inspect and service all electric motors.	✓	/	electrical motors are good
13	Check box floor for water or ice accumulation.	✓	/	no water or ice accumulation
14	Clean up area and note any deficiencies.	✓	/	no deficiencies noted

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:**