

CERTIFICATION OF WORK

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

FACID/Building: Alexandria Date of Visit: 6/27/19
VA002

Contractor Personnel on Site:

1. Patrick Donovan 2. _____

Work Performed:

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

1. 8863, 8898, 8946, 8899, 8917, 8940
P-tacs filters, Mini Split filters, Pumps, Exhaust fans, and heaters, Air Curtains,
Service Calls – Service Call Number and Description Pkg. lot lights.

1. CSS# _____
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Donovan Date: 6/27/19
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: Selina Dibella / SGT Date: 20190627
Signed: [Signature]
E-Mail: selina.a.dibella.mil@mail.mil

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

SITE AND BLDG #: Alexandria 14A002

MECHANIC SIGNATURE: [Signature] DATE: 10/25/17

LOCATION/RM #: Bldg #2 WO# 2899 ASSET # Set

START TIME: 1:00 FINISH TIME: 2:10

DIRECT LABOR		MATERIALS		TOTAL	
NO.	DESCRIPTION	TIME	AMOUNT	TIME	AMOUNT
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"/>			
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"/>			
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.	<input checked="" type="checkbox"/>		<u>done</u>	
2	Clean dirt from heater. vacuuming is preferred.	<input checked="" type="checkbox"/>		<u>done</u>	
3	Check operation of gas valve.	<input checked="" type="checkbox"/>		<u>good</u>	
4	Check for gas leaks.	<input checked="" type="checkbox"/>		<u>no gas detected</u>	
5	Check operation of thermostat.	<input checked="" type="checkbox"/>		<u>good</u>	
6	If applicable, replace primary air intake filter.	<input checked="" type="checkbox"/>		<u>N/A</u>	
7	As needed, clean spark electrode and reset gap, replace if necessary.	<input checked="" type="checkbox"/>		<u>good</u>	
8	Inspect flue pipe and connections.	<input checked="" type="checkbox"/>		<u>good</u>	
9	If applicable, inspect and clean outside air blower and blower intake.	<input checked="" type="checkbox"/>		<u>good clean</u>	
10	Inspect unit for proper operation.	<input checked="" type="checkbox"/>		<u>good</u>	
11	Inspect unit for overall condition and recommend for replacement or other needed repairs.	<input checked="" type="checkbox"/>		<u>good</u>	

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:

Asset # 1345 ✓
1346 ✓

1347 ✓
1348 ✓