

## CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: \_\_\_\_\_ Date of Visit: 8/1/19

Contractor Personnel on Site:

1. _____	3. _____
2. _____	4. _____

### **Work Performed:**

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

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

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## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 8/1/19

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: SFC Ryan Willoughby Date: 8/1/19

Signed: 

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**ICE MAKER**

SITE AND BLDG #: **MD019-01**MECHANIC  
SIGNATURE: DATE: **8/1/19**LOCATION/RM #: **WO# 10086**      **ASSET # 1539**START TIME: **0900**      FINISH TIME: **1630**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
1	Review manufacturer's instructions.	/		
2	De-energize, lock out, and tag electrical circuits.	/		
3	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.	/		
4	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.	/		
5	Only approved cleaning chemicals shall be used.	/		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	/		
2	Visually check for refrigerant, oil and water leaks.	/		
3	Inspect ice condition/size.	/		
4	As needed, drain and clean unit with proper ice machine cleaning solution.	N/A		
5	Check date on water filter, Replace as needed. Water filters should be changed annually at a minimum.	/		there is no water filter on this machine
6	Check and tighten any loose screw-type electrical connections.	/		
7	Check all controls; adjust if necessary.	/		
8	Examine water connection; open and close water valve; test ice dispensing valve and (door) metering adjustment.	/		
9	Check and clear ice machine draining system (drain vent, strainer, trap).	/		
10	Examine condition of bin doors-closure, hinges, gaskets, handles and ease of slide; lubricate as required. Check storage bin condition.	/		
11	Clean motor, compressor, and condenser coil.	/		

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:**

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

SITE AND BLDG #: **MD019-01**MECHANIC  
SIGNATURE: DATE: **8/1/19**

**LOCATION/RM #:** **WO# 10086**    **ASSET # 1540**  
**1541**

START TIME: **0900**FINISH TIME: **1630**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
1	Review manufacturer's instructions.	/	/	
2	De-energize, lock out, and tag electrical circuits.	/	/	
3	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.	/	/	
4	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.	/	/	
5	Closely follow all safety procedures described in the Safety Data Sheet (SDS) for the refrigerant and to all labels on refrigerant containers.	/	/	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	/	/	/
2	Verify indicator light on; check compartment temperature.	/	/	/
3	Examine evaporator for proper clearances/slope and air flow.	/	/	/
4	Examine handles, hinges and tightness of door closure.	/	/	/
5	Examine safety door release and fan shut down safety switch.	/	/	/
6	Inspect lighting for burnt out lamps.	/	/	/
7	Check starter panels and controls for proper operation, burned or loose contacts, and loose connections.	/	/	/
8	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).	/	/	/
9	Clean condenser coil and condensing unit section.	/	/	/
10	Clean and inspect defrost evaporation trays/pans.	/	/	/
11	Inspect defrost systems for proper operation, including timer; adjust as required. Have automatic defrosters adjusted as required so freezer will defrost during "Off Peak" hours	/	/	/
12	Check operation of thermostats; calibrated as required.	/	/	/
13	Check coil superheat and adjust to manufacturers recommendations.	/	/	/
14	Inspect and service all electric motors.	/	/	/

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
15	Inspect door gaskets for damage and proper fit; adjust gaskets as required and lubricate hinges with food grade oil.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16	Check door gasket heater.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17	Check box floor for water or ice accumulation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
18	Check box for excessive ice build- up and open seams.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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To be performed by: General Maintenance Worker

**Additional Notes:**

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**UNIT HEATER, HOT WATER**

SITE AND BLDG #: **MD019-01**MECHANIC  
SIGNATURE: 

DATE:

8/1/19

**LOCATION/RM #:** **RM 150**   **WO#** **10086**   **ASSET #** **1542**  
**1543**

START TIME: **0900**FINISH TIME: **1630**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
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.	/	/	
2	Schedule shutdown with operating personnel.	/	/	
3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	/	/	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check valve for full stroke operation in both directions, if applicable.	/	/	
2	Check valve for signs of abnormal wear and leaks. Replace packing if needed.	/	/	
3	Clean the coil with vacuum cleaner.	/	/	
4	Comb the fins as needed.	/	/	
5	Clean all fans and motors.	/	/	
6	Check operation of controls and safeties.	/	/	
7	Lubricate as required.	/	/	
8	Check all motors, belts, pulleys, shafts, etc. for alignment.	/	/	

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To be performed by: General Maintenance Worker

**Additional Notes:**