

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: \_\_\_\_\_ Date of Visit: **09/24/19**

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: 9/24/19

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: Danielle Barrett Date: 9/24/19

Signed: 

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**FAN COIL UNIT/ DUCTLESS MINI SPLIT**

SITE AND BLDG #: **DE007-02**LOCATION/RM #: **WO# 10559 ASSET # 1797**MECHANIC  
SIGNATURE:DATE: **9/24/19**START TIME: **0900**FINISH TIME: **1630**

| CHECK POINT                                       | CHECKPOINT DESCRIPTION   | TASK COMPLETE |    | NOTES/ ACTIONS<br>(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, as needed.   | /             | /  |   |
| 3   | As needed, de-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work. Follow lock out/tag out procedures at all times.           | /             | /  |   |
| <b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b> |  |               |    |   |
| 1   | Check fan blades for dust buildup and clean if necessary.  | /             | /  |   |
| 2   | When applicable, check fan blades and moving parts for cracks and excessive wear.  | /             | /  |   |
| 3   | Tighten all electrical connectors to proper torque as needed.  | /             | /  |   |
| 4   | Check that the fan runs properly in all speeds as applicable.  | /             | /  |   |
| 5   | Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary. Check felt, repair or replace as necessary.  | /             | /  |   |
| 6   | Check damper actuators and linkage for proper operation as applicable. Adjust linkage on dampers if out of alignment.  | /             | /  |   |
| 7   | Lubricate mechanical connections of dampers sparingly as applicable.   | /             | /  |   |
| 8   | Check the valve(s) for signs of leakage and proper operation. If leak is detected, submit a UE.  | /             | /  |   |
| 9   | Clean coils by brushing, blowing, vacuuming, or pressure washing.  | /             | /  |   |
| 10  | Check coils for leaking, tightness of fittings.  | /             | /  |   |
| 11  | Use fin comb to straighten coil fins as needed.  | /             | /  |   |
| 12  | Check belts for wear and cracks, adjust tension or alignment as applicable. Replace belts when necessary.  | /             | /  |   |
| 13  | Check rigid couplings for alignment on direct drives, and for tightness of assembly  | /             | /  |   |
| 14  | Vacuum interior of unit.   | /             | /  |   |

| CHECK POINT | CHECKPOINT DESCRIPTION  | TASK COMPLETE |          | NOTES/ ACTIONS<br>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|-------------|---|---------------|----------|---|
|             |   | YES           | NO       |   |
| 15          | Check filter door for proper gasketing and air leaks. Correct as necessary. | <i>C</i>      | <i>C</i> |   |
| 16          | Change the filter as needed with the correct size and type filter.          | <i>C</i>      | <i>C</i> |   |
| 17          | Insure that drain(s) are clear and running.                                 | <i>C</i>      | <i>C</i> |   |
| 18          | Clean up work area.   | <i>C</i>      | <i>C</i> |   |

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:**