

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 11/24/20

Contractor Personnel on Site:

- | | |
|-------------------------|------------|
| 1. <u>PATRICK BROWN</u> | 3. <u></u> |
| 2. <u></u> | 4. <u></u> |

Work Performed:

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

1. WO'S 10421-10422MO, 10612-10615QT, 10632SA, 10635PMM, 10648PMQ
2. 10660PMS, 10616-10619QT
3. LIGHTING, GATES, WATERPUMP, CHILLER, EXPANSION TANKS
4. WATER HEATER, DOWNSPOUTS/GUTTERS,
5.

CERTIFICATION OF WORK

To be signed by the Contractor:


Print Name: Patrick Brown Date: 11/24/20

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: SGT STORMS Date: 11/24/20

Signed: 

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
AIR COOLED CHILLER, PACKAGE UNIT

MECHANIC
SIGNATURE: 

DATE: 11/24/20

START TIME: 10:30am

FINISH TIME: 11:30am

SITE AND BLDG #: NY039-01

LOCATION/RM #: WO# 10632 ASSET # 9890

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	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"/>	<input type="checkbox"/>	
2	No intentional venting of refrigerants is permitted. During the servicing, maintenance, and repair of refrigeration equipment, the refrigerant must be recovered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Whenever refrigerant is added or removed from equipment, record the quantities on the appropriate forms. Forms to be maintained by technician in universal waste binder.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Recover, recycle, or reclaim the refrigerant as appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	If disposal of the equipment item is required, follow regulations concerning removal of refrigerants and disposal of the item.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7	Refrigerant oils to be treated as hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8	Closely follow all safety procedures described in the Safety Data Sheet (SDS) for the refrigerant and all labels on refrigerant containers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9	Remove access covers prior to accomplishing check points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
CONDENSER				
1	Remove debris from air screen and clean underneath unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	no debris
2	Pressure wash coil with proper cleaning solution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	coils are clean
3	Straighten fin tubes with fin comb.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	fin tubes are straight
4	Check electrical wiring and tighten loose connections. Check fused disconnect switches for condition and operation, contactors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	electrical connections are tight
5	Check mounting for tightness.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	mounts are tight
6	Check for corrosion. Clean and treat with inhibitor as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	no corrosion found
7	Check fan or blower for bent or damaged blades and imbalance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	no bent or damage blades

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
8	Lubricate shaft and motor bearings on fans and remove old or excess lubricant, if applicable.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
9	Inspect pulleys, belts, couplings, etc.; adjust tension and tighten mountings as necessary. Change badly worn belts. Multi-belt drives should be replaced with matched sets.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no pullies belts or couplings
EVAPORATOR				
1	Inspect evaporator for any obvious deficiencies.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no obvious deficiencies
2	Inspect plumbing, valves and flanges for leaks and correct as needed.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no leaks found
COMPRESSOR(S)				
1	Lubricate drive coupling, if applicable.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	Lubricate motor bearings (non-hermetic), if applicable.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	hermetic
3	Check bearings for vibrations or unusual noises.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no unusual noises
4	Leak test unit with soap test or electronic device.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	used electronic device
5	Check compressor oil level., if applicable.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	hermetic compressor
6	Run machine; check action of controls, relays, switches, etc. to see that: a. Compressor(s) run at proper settings. b. Suction and discharge pressures are proper.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	relays and switches are good
7	Check vibration eliminators. Replace as necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eliminators are good
8	Document AMP draw on compressors	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	L1 120. L2 120. L3 120
9	Check safety controls for high pressure cut off.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
CONTROLS				
1	Record chilled water supply and return temps and Humidity .	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

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 discription of the deficiency.

To be performed by: HVAC Technician

Additional Notes: