

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: VA048 Date of Visit: 11/6/19

Contractor Personnel on Site:

- | | |
|----------------------|----------|
| 1. <u>BILL DAVIS</u> | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

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

1. WO'S 11121FQ, 11134MO, 11156QT, 11179SA
2. FILTERS, GATE, ICE MAKER, WATER HEATER, SUMP PUMP, AC WALL UNIT
3. AIR HANDLERS, CONDENSING UNIT, DEHUMIDIFIER
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Bill Davis Date: 11/6/19

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: Kimesha Drakes Date: 11/19/19

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

ICE MAKER

SITE AND BLDG #: **VA048-01**

MECHANIC

SIGNATURE: DATE: **11-6-19**

LOCATION/RM #:

WO# **11156**ASSET # **1586**START TIME: **8AM**FINISH TIME: **4PM**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	De-energize, lock out, and tag electrical circuits.	<input checked="" type="checkbox"/>		
2	Only approved cleaning chemicals shall be used.	<input checked="" type="checkbox"/>		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	<input checked="" type="checkbox"/>		
2	Visually check for refrigerant, oil and water leaks.	<input checked="" type="checkbox"/>		
3	Inspect ice condition/size.	<input checked="" type="checkbox"/>		
4	Clean air filter	<input checked="" type="checkbox"/>		
5	As needed, drain and clean unit with proper ice machine cleaning solution. Drain and clean at a minimum of annually.	<input checked="" type="checkbox"/>		
6	Check date on water filter, Replace as needed. Water filters should be changed annually at a minimum.	<input checked="" type="checkbox"/>		
7	Check and tighten any loose screw-type electrical connections.	<input checked="" type="checkbox"/>		
8	Check all controls; adjust if necessary.	<input checked="" type="checkbox"/>		
9	Examine water connection; open and close water valve; test ice dispensing valve and (door) metering adjustment.	<input checked="" type="checkbox"/>		
10	Check and clear ice machine draining system (drain vent, strainer, trap).	<input checked="" type="checkbox"/>		
11	Examine condition of bin doors-closure, hinges, gaskets, handles and ease of slide; lubricate as required. Check storage bin condition.	<input checked="" type="checkbox"/>		
12	Clean motor, compressor, and condenser coil.	<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: General Maintenance Worker

Additional Notes:



PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **DOMESTIC HOT WATER HEATER - GAS**

SITE AND BLDG #: **VA048-01**

MECHANIC

SIGNATURE: 

DATE:

11-6-19

LOCATION/RM #: **RM 117** WO# **11156** ASSET # **1588**START TIME: **8 AM**FINISH TIME: **4 PM**

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.	✓		
2	Use caution when working with natural gas fired equipment. Be aware of any smells (rotten egg) that could be a natural gas leak.	✓		
3	Do not allow any open flames around equipment.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Attach drain hose. Drain several gallons from tank to remove sediment.		✓	TANKLESS HEATER. N/A
2	Manually check operation of safety valve. Check for corrosion around valve. Verify the safety valve inspection tag is in place. Ensure that no personnel are in area of relief piping discharge.	✓		
3	Check all connections - electric, gas and water. Tighten as necessary.	✓		
4	Check operation and setting of aquastat. Check hot water temperature with dial thermometer, and set aquastat at minimum value required for all uses.	✓		
5	Clean water heater exterior.	✓		
6	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.	✓		
7	Soap test for gas leaks, if leaks are found notify facility manager and AFOS immediately.	✓		
8	Clean up work area and remove trash.	✓		

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:



TANKLESS HEATER

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **SUMP PUMP**

SITE AND BLDG #: VA048-01

MECHANIC

SIGNATURE: 

DATE: 11-6-14

LOCATION/RM #: RM 117

WO#

11179 ¹¹¹⁵⁶

ASSET # 1589

START TIME: 8 AM

FINISH TIME: 4 PM

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.	✓		
2	Excessive sediment and debris, not removed by flushing the pit should be handled on a project basis, and not considered under this standard.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Remove cover plates and flush pit.		✓	N/A
2	Inspect check valve.	✓		
3	Inspect interior of pit for cracks.	✓		
4	Inspect cover plate is in place	✓		
5	Insuure the unit is operating properly, report any deficiencies	✓		
6	Clean up work area and remove all debris.	✓		

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: General Maintenance Worker

Additional Notes: