CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE

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

FACID/Building: __NY067_____   Date of Visit: _11-20-18_____

Contractor Personnel on Site:

1. __Patrick Brown_____   3. _____

2. _____   4. _____

Work Performed:

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

1. __1010 MO, 1119 QT, 1120 QT, 1121 QT, 1122 QT, 1123 QT, 1124 QT, 1125 QT, 1126 QT__

2. __1127 QT, 1128 QT, 1129 QT, 1130 QT__

3. __Motor Vehicle Area Light, Chill Water Pump, Hot Water Pump, Freezer, Fridge, Ice Maker__

4. __Emergency Light, Water Heater, Emergency Light, Emergency Exit Sign__

5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _Patrick Brown_____   Date: _11-20-18_____

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: _Douglas Rushlo_____   Date: _11/20/18_____

Signed: _____

E-Mail: _douglas.rushlo.civ@mail.mil_____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
REACH-IN REFRIGERATORS/ FREEZERS

CMI Management Inc.

SITE AND BLDG #: NY067 - BIDG 1

LOCATION/RM #: kitchen **WO#** 1121 / 1122 **ASSET #** 10566 / 10567

MECHANIC SIGNATURE: _(signature)_ **DATE:** 11-14-18

START TIME: 2:30 **FINISH TIME:** 3:30

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES	NO	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
	SPECIAL INSTRUCTIONS			
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.	N/A ✓		
4	If materials containing refrigerants are discarded, comply with EPA regulations as applicable.	N/A		
5	Closely follow all safety procedures described in the Safety Data Sheet (SDS) for the refrigerant and to all labels on refrigerant containers.	✓		
	TO BE PERFORMED AT EACH INSPECTION SERVICE			
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	✓		No deficiencies noted
2	Verify indicator light on; check compartment temperature.	✓		temp were only .5° off
3	Examine evaporator for proper clearances/slope and air flow.	✓		Handles and Hinges are tight
4	Examine handles, hinges and tightness of door closure.	✓		Evaporator is in good condition
5	Examine safety door release and fan shut down safety switch.	✓		Working Properly
6	Inspect lighting for burnt out lamps.	✓		all lights are working
7	Check starter panels and controls for proper operation, burned or loose contacts, and loose connections.	✓		No loose or Burnt connections, contacts are good
8	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).	✓		Coil was Dirty Pan was Dry Blowers Fans and Motors are Clean Now
9	Clean condenser coil and condensing unit section.	✓		Condensor coil and unit are clean
10	Clean and inspect defrost evaporation trays/pans.	✓		tray is in good shape No holes
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	✓		Defrost is operation properly Did not have to make any adjustments
12	Check operation of thermostats; calibrated as required.	✓		
13	Check coil superheat and adjust to manufacturers recommendations.	✓		
14	Inspect and service all electric motors.	✓		