

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY127 Date of Visit: 1/13/21

Contractor Personnel on Site:

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

**Work Performed:**

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

1. WO#'S
2. 11430,11449,11457,11438,11450,11458,11451,11459
3. ASSET#'S
4. 190917-646,648,649,653,654,656,657,661,684,602,621,
5. 644,724,712,687,729,732,

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1/13/21

Signed: \_\_\_\_\_

To be signed by Facility Manager:

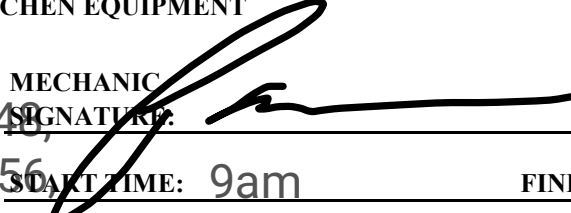
By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: CHRIS Pothier AFOS Date: 1/13/21

Signed: Chris Pothier

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**MISCELLANEOUS KITCHEN EQUIPMENT**

ACTIVITY AND BLDG #: NY127 BLDG1 190917-648, MECHANIC SIGNATURE:  DATE: 1/13/21  
 LOCATION/RM #: kitchen WO# 11430 ASSET # 649,653,656, 657,661 START TIME: 9am FINISH TIME: 10:30am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	De-energize, lock out, and tag electrical circuits and fuel service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operator or manager for any deficiencies, verify cleaning program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	no deficiencies noted
2	Check all controls, mechanisms for proper operation; adjust as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	controls function properly
3	If applicable, examine utility supply line, piping, valve packing, specialties, and insulation; look for any leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	no leaks found
4	If applicable, check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Powerline and disconnect are in good condition
5	Ensure unit is clean and in working order. Note any deficiencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	unit is clean and in working order

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

### OVEN

 ACTIVITY AND BLDG #: NY127 BLDG1

 MECHANIC SIGNATURE:  DATE: 1/13/21

 LOCATION/RM #: kitchen WO# 11430 ASSET # 190917-654 START TIME: 7:45am FINISH TIME: 8:15am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	De-energize, lock out, and tag electrical circuits and fuel service.	<input checked="" type="checkbox"/>	<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"/>	<input checked="" type="checkbox"/>	no deficiencies noted
2	Check all controls, mechanisms for proper operation; adjust as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	controls function properly
3	Examine utility supply line, piping, valve packing, specialties, and insulation; look for leaks.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no leaks found
4	Check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	all are good
5	Check the operation of thermostats; calibrate if required	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	thermostat is correct
6	Clean and adjust gas burners.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	gas burners burn correctly
7	Check safety pilot and solenoid.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	solenoid functions properly
8	Clean and adjust pilot light assembly.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	pilot light and assembly are good
9	Check flue for proper draft or obstructions.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no obstructions
10	Lubricate gas valves.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
11	Clean interior walls and elements to obtain maximum heat transfer.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	walls and elements are clean
12	Check gaskets and seals; check doors for tightness and warping; lubricate hinges and repair as necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	gaskets and hinges are good
13	Examine handles, knobs and controls for tightness and safe condition.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	all are tight

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

### FOOD SERVING TABLE

ACTIVITY AND BLDG #: NY127 BLDG1

MECHANIC

SIGNATURE: 

DATE: 1/13/21

LOCATION/RM #: kitchen WO# 11430

ASSET # 190917-646

START TIME: 7:30am

FINISH TIME: 7:45am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	If any safety deficiencies are found which could cause injury or damage, notify the cafeteria operator immediately and secure the equipment from further operations.	<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	no deficiencies noted
2	Clean all exterior laminated surfaces, aluminium hardware and wire shelves with a mild soap solution, using a damp cloth followed by a lint-free dry cloth.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	all are clean
3	All glass can be cleaned with a non-abrasive cleaner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	used sprayway glass cleaner
4	Plexiglas can be cleaned and polished with specialized acrylic cleaners. Do not use strong alkali solutions, steel wool, or abrasive cleaners.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	no plexiglas
5	Stainless steel surfaces may be cleaned with a non-abrasive cleaner applied liberally. Wipe and dry with smooth strokes in the direction of the polish marks on the steel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	surfaces are clean
6	To clean the interior of the display case and wire shelves, use a mild soap solution using a damp cloth followed by a lint-free dry cloth, being sure to wring out excess water	<input checked="" type="checkbox"/>	<input type="checkbox"/>	interior of unit is clean

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:**