

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY051 Date of Visit: 3/8/21 , 3/10/21

Contractor Personnel on Site:

1. Patrick Brown 3. _____
2. _____ 4. _____

Work Performed:

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

1. WO#'S , 11929 - 11932 , 12008 , 12009 , 12067 , 12068
2. - 12071 , 12215 , 12234 , 12036
3. ASSET#'S , 10035 , 10036 , 10066 , 10069 , 10046 ,
4. 190917-294 , 299 , 278 , 10073 , 10077 , 10080 ,
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 3/10/21

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: SFC PATRIC HANLON Date: 3/10/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
PTAC

SITE AND BLDG #: **NY051 BLDG2**

BLDG2 office **LOCATION/RM #:** **WO#11932** **ASSET #** **10077**

MECHANIC
SIGNATURE: DATE: **3/10/21**START TIME: **9:30am**FINISH TIME: **10am**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Schedule shutdown with operating personnel, as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Clean the filter with a vacuum or running water. Inspecet filter quarterly, replace/clean as needed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	filter has been rinsed
2	Remove the front grille and clean it with a dampened cloth.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grill is clean.
3	Inspect the control panel door and plug. Repair deficiencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	no deficiencies found
4	Check the caulking around the PTAC wall sleeve to make sure all air and water openings are properly sealed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	all openings are properly sealed
5	Check that condensate drains properly. Remove any debris/blockages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	condensate drains correctly
6	Clean condenser coils with proper coil cleaner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	coils are clean
7	Place drain pan cleaner tablet in the basepan to inhibit bacteria growth.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	tablet is good
8	Check clearance around the HVAC unit to ensure that the intake air and discharge air paths are not blocked or restricted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	air paths are not blocked
9	Clean up work area.	<input checked="" type="checkbox"/>	<input 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 perfomed by: General Maintenance Worker

Additional Notes: