

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE002 Date of Visit: 3/4/20

Contractor Personnel on Site:

1. <u>John Brown</u>	3. _____
2. _____	4. _____

**Work Performed:**

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

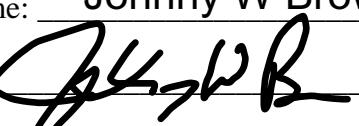
1. 10184FQ,10275MO,102801QT,103198A,103378A
2. FILTERS, LIGHTING, VEHICLE EXHAUST, CIRCULATING PUMPS, HEATERS
3. MINI-SPLITS, CONDENSERS
4. 11804FQ,11824AN,11836MO,11847QT,11867SA,11887SA,11915PMF,11933PMS
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 3/4/20

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: Hector Costalanos Date: 3/4/20

Signed: 

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**OUTDOOR CONDENSING UNIT**

SITE AND BLDG #: **DE002-01**MECHANIC  
SIGNATURE: DATE: **3/4/20**

LOCATION/RM #: **WO# 11887 ASSET # 1721 -1723**  
**11933 190918-125**

START TIME: **0900** FINISH TIME: **1630**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
1	In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered to.	/	/	
2	Schedule outage of unit with personnel in area the unit serves.	/	/	
3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	/	/	
4	If disposal of the equipment is required, follow regulations concerning removal of refrigerants and disposal of the unit.	/	/	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Remove debris from air screen and clean underneath unit.	/	/	
2	Wash coil with coil cleaning solution - Rinse Thoroughly	/	/	
3	Straighten fin tubes with fin comb, as needed.	/	/	
4	Check electrical connections for tightness.	/	/	
5	Check mounting base for tightness.	/	/	
6	Inspect fans for bent blades, unbalance, excessive noise and vibrations.	/	/	
7	Inspect all piping for leaks and tighten loose connections.	/	/	
8	Check wires at condenser electrical fused safety switches for tightness and burned insulation. Repair as necessary.	/	/	
9	Check supply air temperature to ensure unit is operating properly. If possible record room temperature.	/	/	
10	Inspect unit for overall condition and recommend for replacement or other needed repairs.	/	/	
11	Clean up work area.	/	/	

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: HVAC Technician

Additional Notes:

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**EMERGENCY EXIT SIGNS AND WALL PACKS**

ACTIVITY AND BLDG #: **DE002-01**MECHANIC  
SIGNATURE: 

DATE:

**3/4/20**

LOCATION/RM #:

**WO# 11933****ASSET # 190918-125**

START TIME:

**0900**

FINISH TIME:

**1630**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Inspect for structural defects, note needed repairs	/	/	
2	Push test buttons and observe light operation. Note any units that do not operate properly.- Report issues and open a CM ticket	/	/	
3	Clean exterior with dry cloth.	/	/	
4	For Exit lights check for proper arrow direction.	/	/	
5	Make and/or recommend any needed repairs.	/	/	

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To be performed by: General Maintenance Worker

**Additional Notes:**