

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE001 Date of Visit: 9/3/20

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. WO 12619FQ,12641MO,12691PMA,12718PMF,12729PMQ,12734PMS
2. 12620FQ,12692SA, 12719PMF,12735PMS
3. FILTERS,LIGHTILING,MINI SPLIT, HAVA CONTROL PANEL,
4. CHEMICAL POT FEEDEREXPANSION TANKS,WALL PACKS,
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

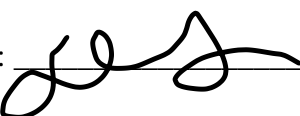
Print Name: Johnny W Brown Date: 9/3/20

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: Trecka Derilus Date: 9/3/20

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

DUCTLESS MINI SPLIT

MECHANIC SIGNATURE:  DATE: 9/17/20

START TIME: 0900 FINISH TIME: 1630

SITE AND BLDG #: DE001

LOCATION/RM #: WO# 12734 ASSET # 190918-105

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	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.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check fan blades for dust buildup and clean if necessary.			
2	Check all electrical connections			
3	Check that the fan runs properly in all speeds as applicable.			
4	Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary.			
5	Check filter door for proper gasketing and air leaks. Correct as needed.			
6	Change or Clean filter as needed. Filters get checked quarterly.			
7	Ensure condensate pump is working properly and that the drain lines are clear.			
8	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 discription of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **OUTDOOR CONDENSING UNIT**

SITE AND BLDG #: **DE001-01**MECHANIC
SIGNATURE: DATE: **9/3/20**LOCATION/RM #: **WO# 12734 ASSET # 191918-106**
191918-107START TIME: **0900**FINISH TIME: **1630**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Schedule outage of unit with personnel in area the unit serves.			
2	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.			
3	If disposal of the equipment is required, follow regulations concerning removal of refrigerants and disposal of the unit.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
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.and Humidity			Room temp _____ Room Humidity _____%
10	Inspect unit for overall condition and recommend for replacement or other needed repairs.			
11	Clean up work area.			

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To be performed by: HVAC Technician

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
EMERGENCY EXIT SIGNS AND WALL PACKS

ACTIVITY AND BLDG #: DE001-01

**MECHANIC
SIGNATURE:**











DATE: 9/3/20

LOCATION/RM #: **WO#** 12734 **ASSET #** 190918-110

START TIME: 0900

FINISH TIME: 1630

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
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.			

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: