

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD002 Date of Visit: 11/30/20

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'S 12937FQ,12979MO,12992QT,13015SA,13085Q,13100S, 13016SA,12993QT,
2. 12938FQ,12994QT,13017SA,12939FQ,13018SA,13056F,13081Q,13095PMS,
3. FILTERS,OUTSIDE LIGHTING, KITCHEN EQUIP, WATER HEATERS, EXP TANK
4. AIR HANDLERS,CONDENSING UNITS, CHILLER, DEHUMIDIFIERS,
5. VFD'S, FURNACE, SUMP PUMP,VRF UNITS,AHU UNITS

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 11/30/20

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: SFC Jason Lamontagne Date: 11/30/20

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
LIGHTING, OUTSIDE

SITE AND BLDG #: **MD002-01**MECHANIC
SIGNATURE: DATE: **11/9/20**

LOCATION/RM #:	WO# 12979	ASSET # 1455
	12992	1503

START 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 and coordinate work with operating personnel.	/	/	
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.	/	/	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Inspect lighting contactor for pitting or arcing - report issues	/	/	
2	Inspect visual condition of wiring. Look for evidence of overheating.	/	/	
3	Check for proper light operation.	/	/	
4	Test operation of automatic switches/ time clock/ photocells if applicable.	/	/	
5	Inspect light pole and mounting devices for deficiencies.	/	/	
6	For any noted deficiency, takes pictures and open corrective maintenance ticket.	/	/	

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: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
REACH-IN REFRIGERATORS/ FREEZERS

SITE AND BLDG #: **MD002-01**MECHANIC
SIGNATURE: DATE: **11/9/20**

LOCATION/RM #: **WO# 12992** **ASSET # 1495/1496** **13085** **190918-157** **START 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	De-energize, lock out, and tag electrical circuits.	/	/	
2	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.	/	/	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	/	/	
2	Verify indicator light on; check compartment temperature.	/	/	
3	Examine evaporator for proper clearances/slope and air flow.	/	/	
4	Examine handles, hinges and tightness of door closure.	/	/	
5	Examine safety door release and fan shut down safety switch.	/	/	
6	Inspect lighting for burnt out lamps. Replace if required.	/	/	
7	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).	/	/	
8	Clean condenser coil and condensing unit section.	/	/	
9	Clean and inspect defrost evaporation trays/pans.	/	/	
10	Check operation of thermostats; calibrated as required.	/	/	
11	Check coil superheat and adjust to manufacturers recommendations.	/	/	
12	Inspect and service all electric motors.	/	/	
13	Check box floor for water or ice accumulation.	/	/	
14	Clean up area and note any deficiencies.	/	/	

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: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
ICE MAKER

SITE AND BLDG #: **MD002-01**MECHANIC
SIGNATURE:DATE: **11/9/20**LOCATION/RM #: **WO# 12992 ASSET # 1497**START 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	De-energize, lock out, and tag electrical circuits.	/	/	
2	Only approved cleaning chemicals shall be used.	/	/	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	/	/	
2	Visually check for refrigerant, oil and water leaks.	/	/	
3	Inspect ice condition/size.	/	/	
4	Clean air filter	/	/	
5	As needed, drain and clean unit with proper ice machine cleaning solution. Drain and clean at a minimum of annually.	/	/	
6	Check date on water filter, Replace as needed. Water filters should be changed annually at a minimum.	/	/	
7	Check and tighten any loose screw-type electrical connections.	/	/	
8	Check all controls; adjust if necessary.	/	/	
9	Examine water connection; open and close water valve; test ice dispensing valve and (door) metering adjustment.	/	/	
10	Check and clear ice machine draining system (drain vent, strainer, trap).	/	/	
11	Examine condition of bin doors-closure, hinges, gaskets, handles and ease of slide; lubricate as required. Check storage bin condition.	/	/	
12	Clean motor, compressor, and condenser coil.	/	/	

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To be performed by: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

UNIT HEATER, HOT WATER

SITE AND BLDG #: **MD002-01**

MECHANIC
SIGNATURE

DATE: 11/9/20

START 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 shutdown with operating personnel.			
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.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check valve for signs of abnormal wear and leaks. Replace packing if needed.			
2	Clean the coils			
3	Comb the fins as needed.			
4	Clean all fans and motors.			
5	Check operation of controls and safeties.			
6	Lubricate as required.			
7	Check all motors, belts, pulleys, shafts, etc. for alignment.			

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To be performed by: General Maintenance Worker

Additional Notes: