<div align="center">

CERTIFICATION OF WORK
**PREVENTIVE MAINTENANCE**

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

</div>

FACID/Building: __MD019_____ Date of Visit: __11/18/20_____

Contractor Personnel on Site:

1. __John Brown_____      3. _____

2. _____      4. _____

**Work Performed:**

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

1. __WO'S 12943FQ,12980MO,12997QT,13022SA,13061F,13088Q,13103S__

2. __12944FQ,12998QT_____

3. __FILTERS,GATE, KITCHEN EQUIP, WATER HEATERS. AIR HANDLER, CHILLER__

4. __HUMIDIFIER, FURNACE, SUMPPUMP, TIME CLOCK,  VFD_____

5. _____

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<div align="center">

**CERTIFICATION OF WORK**

</div>

To be signed by the Contractor:

Print Name: __Johnny W Brown_____ Date: ____11/18/20__

Signed: _~~Johnny W B~~_____
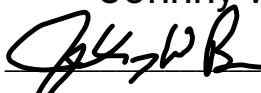
To be signed by Facility Manager:

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 William schaffer_____ Date:__11/18/20__

Signed: _~~signature~~_____
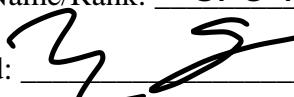
E-Mail: _____

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
## FURNACE

**ACTIVITY AND BLDG #:** MD019-01

**LOCATION/RM #:**    **WO#** 13103    **ASSET #** 190918-189

**MECHANIC SIGNATURE** _[signature]_   **DATE:** 11/18/20

**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 | 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 | Replace air filter if applicable | ✓ | | |
| 2 | Check the fire box liner or refractory for cracks and leaks. | ✓ | | |
| 3 | Check smoke stack for obstructions, leaks, etc. | ✓ | | |
| 5 | Clean all fans and motors. | ✓ | | |
| 6 | Check operation of controls and safeties. | ✓ | | |
| 7 | Lubricate as required. | ✓ | | |
| 8 | Check and clean plenum (clean cooling coils and check for leaks, if | ✓ | | |
| 9 | Check all motors, belts, pulleys, shafts, etc. for alignment. | ✓ | | |
| 10 | Report any rust issues and open a CM ticket | ✓ | | |
| 11 | Remove lock outs and tags. Restore fuel and power supply. | ✓ | | |

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: HVAC Technician

**Additional Notes:**

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
## VARIABLE FREQUENCY DRIVE

| | | |
|---|---|---|
| **SITE AND BLDG #:** MD019-01 | **MECHANIC SIGNATURE** | **DATE:** 11/18/20 |
| **LOCATION/RM #:** **WO#** 13103 **ASSET #** 191918-190 | **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 | 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 | Perform a complete visual inspection and cleaning.  Broken or damaged parts are replaced as required.  Inspected for ambient temperature, dust, dirt, moisture, evidence of overheating, corrosion, integrity, etc. Capacitors are checked for leakage.  Conductors and parts are checked for proper insulation.  Drives are cleaned using vacuum or compressed air as required. Filters are cleaned or replaced.  Power connections are re-torqued to manufacturer's specifications. | ✓ | | |

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: HVAC Technician

**Additional Notes:**