

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: VA006-01 Date of Visit: 2.02.2021

Contractor Personnel on Site:

- | | |
|--------------------------|----------|
| 1. <u>Richard Walker</u> | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

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

- ASSET#'s
- | | |
|-------------------------------|-------|
| 1. <u>2238,2239,1573,1574</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:


Print Name: Richard Walker Date: 2.02.2021

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: Don Huson Date: 2.02.2021

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

ICE MAKER

SITE AND BLDG #: VA006-01MECHANIC SIGNATURE: Paul Walker DATE: 2.17.2021LOCATION/RM #: Kitchen WO# 13535 ASSET # 1573START TIME: 9am FINISH TIME: 5pm

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.	✓		Replaced
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.	✓		

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 #: VA006-01

 MECHANIC SIGNATURE: Phil Walker

 DATE: 2.17.2021

 LOCATION/RM #: Kitchen WO# 13535 ASSET # 1574

 START TIME: 9am

 FINISH TIME: 5pm

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

To be performed by: General Maintenance Worker

Additional Notes: