

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 12-4-18 / 12-6-18 / 12-17-18

Contractor Personnel on Site:

- |                         |          |
|-------------------------|----------|
| 1. <u>Patrick Brown</u> | 3. _____ |
| 2. _____                | 4. _____ |

**Work Performed:**

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

1. 1383 FQT, 1384 FQT, 1419 MO, 1420 MO, 1647 SA, 1648 SA, 1649 SA, 1650 SA
2. 1651 SA, 1652 SA, 1460 QT, 1653 SA, 1654 SA
3. Air Handler, Fan Coil, DOuble Light, Single Gate, Unit Heater, Floor Mounted
4. Fan Coil, Unit Heater, Double Light, Exhaust System, Unit Heater
5. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 12-21-18

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: Doug Rushlo Date: 12/21/18

Signed: \_\_\_\_\_

E-Mail: douglas.rushlo.cfo@mail.mil

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **FAN COIL UNIT/ DUCTLESS MINI SPLIT**

**SITE AND BLDG #:** NY039- Bldg 1  
*army side*  
**LOCATION/RM #:** Bldg 1 **WO#** 1384 **ASSET #** 9896  
1650

**MECHANIC  
SIGNATURE:** \_\_\_\_\_

**DATE:** 12-17-18

**START TIME:** 11:30 AM

**FINISH TIME:** 2:30 PM

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 shutdown with operating personnel, as needed.	✓		
3	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.	✓		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check fan blades for dust buildup and clean if necessary.	✓		
2	When applicable, check fan blades and moving parts for cracks and excessive wear.	✓		<i>NO EXCESSIVE WEAR</i>
3	Tighten all electrical connectors to proper torque as needed.	✓		<i>all were tight</i>
4	Check that the fan runs properly in all speeds as applicable.	✓		
5	Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary. Check felt, repair or replace as necessary.		✓	<i>NO auto Diffusers</i>
6	Check damper actuators and linkage for proper operation as applicable. Adjust linkage on dampers if out of alignment.	✓		
7	Lubricate mechanical connections of dampers sparingly as applicable.	✓		
8	Check the valve(s) for signs of leakage and proper operation. If leak is detected, submit a UE.	✓		<i>NO Leaks</i>
9	Clean coils by brushing, blowing, vacuuming, or pressure washing.	✓		<i>vacuumed</i>
10	Check coils for leaking, tightness of fittings.	✓		<i>NO leaks</i>
11	Use fin comb to straighten coil fins as needed.	✓		<i>Fins were good</i>
12	Check belts for wear and cracks, adjust tension or alignment as applicable. Replace belts when necessary.		✓	<i>direct Drive</i>
13	Check rigid couplings for alignment on direct drives, and for tightness of assembly	✓		
14	Vacuum interior of unit.	✓		

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
15	Check filter door for proper gasketing and air leaks. Correct as necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16	Change the filter as needed with the correct size and type filter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO AIR LEAKS
17	Insure that drain(s) are clear and running.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FILTERS DID NOT NEED TO BE CHANGED
18	Clean up work area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DRAIN IS CLEAR

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:**