

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD019 Date of Visit: 05/20/21

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. _____
2. _____
3. summer winter change over.
4. _____
5. _____

85

74

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 05/20/21

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 William Schaffer Date: 05/20/21

Signed: 

E-Mail: 

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
VARIABLE FREQUENCY DRIVE

SITE AND BLDG #: MD019 B-1MECHANIC
SIGNATURE: DATE: 05/20/21LOCATION/RM #: WO#14133 ASSET # 190918-190 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 description of the deficiency.

To be performed by: HVAC Technician

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

MAKE UP AIR UNIT - HEATING/COOLING

SITE AND BLDG #:

MD019 B-2

MECHANIC
SIGNATURE:

DATE: 05/20/21

LOCATION/RM #:

WO# 14133 ASSET # 190918-189

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 thermostat settings to ensure the cooling and heating system is operating correctly. | / | / | |
| 2 | Tighten all electrical connections and measure voltage and current on motors. | / | / | |
| 3 | Check filters and clean or replace as necessary. | / | / | |
| 4 | Lubricate all moving parts. | / | / | |
| 5 | Check and inspect the condensate drain in your central air conditioner, furnace and/or heat pump (when in cooling mode). | / | / | |
| 6 | Check controls of the system to ensure proper and safe operation. Check the starting cycle of the equipment to assure the system starts, operates, and shuts off properly. | / | / | |
| 7 | Clean evaporator and condenser air conditioning coils. | / | / | |
| 8 | Clean and adjust blower components to provide proper system airflow. | / | / | |
| 9 | Check all gas (or oil) connections, gas pressure, burner combustion and heat exchanger. | / | / | |

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To be performed by: HVAC Technician

Additional Notes: