

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD002 Date of Visit: 06/29/21

Contractor Personnel on Site:

- |          |          |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

**Work Performed:**

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

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

74

43

**CERTIFICATION OF WORK**

To be signed by the Contractor:

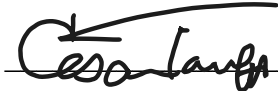
Print Name: Johnny W Brown Date: 06/29/21

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 Cesar Torres Date: 06/29/21

Signed: 

E-Mail: \_\_\_\_\_

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

### EXHAUST FANS

SITE AND BLDG #: MD002 B-1MECHANIC SIGNATURE:  DATE: 06/28/21LOCATION/RM #: WO# 14224 ASSET # 1063-1068START TIME: 0900 FINISH TIME: 1630

| CHECK POINT                                | CHECKPOINT DESCRIPTION                                                                                                                                                    | TASK COMPLETE                                                                        |                                                                                       | NOTES/ ACTIONS<br>(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                                          | Clean unit, especially fan blades.                                                                                                                                        |    |    |                                                                         |
| 2                                          | Inspect pulleys, belts, couplings, etc.; adjust tension and tighten mountings as necessary. Change badly worn belts. Multiple belts should be replaced with matched sets. |    |    |                                                                         |
| 3                                          | Perform required lubrication and remove old or excess lubricant.                                                                                                          |    |    |                                                                         |
| 4                                          | Clean motor with vacuum or low pressure dry air (less than 40 psig). Check for obstructions in motor cooling and air flow.                                                |   |  |                                                                         |
| 5                                          | Check structural members, vibration eliminators, and flexible connections. Check fan housing to ensure there is no damage and the housing is tight.                       |  |  |                                                                         |
| 6                                          | Start unit and check for vibration and noise.                                                                                                                             |  |  |                                                                         |
| 7                                          | Remove all trash and debris.                                                                                                                                              |  |  |                                                                         |

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:**