

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: DE007 Date of Visit: 06/17/21

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: 06/17/21

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: _____ Date: _____

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FAN COIL UNIT

SITE AND BLDG #:

DE007 B-1

MECHANIC
SIGNATURE:

DATE: 06/17/21

LOCATION/RM #:

WO# 14190

ASSET #

1743-1745,1753

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 | 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. | / | / | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 1 | Check fan blades for dust buildup and clean if necessary. | / | / | |
| 2 | Check fan blades and moving parts for cracks and excessive wear. | / | / | |
| 3 | Tighten all electrical connectors to proper torque as needed. | / | / | |
| 4 | Check that the fan runs properly in all speeds as applicable. | / | / | 5 |
| 5 | Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary. Check felt, repair or replace as necessary. | / | / | |
| 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 CM. | / | / | |
| 9 | Clean coils by brushing, blowing, vacuuming | / | / | |
| 10 | Check coils for leaking, tightness of fittings. | / | / | |
| 11 | Use fin comb to straighten coil fins as needed. | / | / | |
| 12 | Check belts for wear and cracks, adjust tension or alignment as applicable. Replace belts when necessary. | / | / | |
| 13 | Check rigid couplings for alignment on direct drives, and for tightness of assembly | / | / | |
| 14 | Vacuum interior of unit. | / | / | |
| 15 | Check filter door for proper gasketing and air leaks. Correct as needed. | / | / | |
| 16 | Change the filter as needed with the correct size and type filter. | / | / | Filter gets checked Quarterly |
| 17 | Insure that drain(s) are clear and running. - Install condensate tablet | / | / | |
| 18 | Clean up work area. - Record Humidity level in area | / | / | Humidity % |

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: