

CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: NY051

Date of Visit: 12-27-18 / 12-12-18

Contractor Personnel on Site:

1. Patrick Brown
2. _____
3. _____
4. _____

Work Performed:

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

1. 1295 FQT, 1296 FQT, 1392 MO, 1393 MO, 1468 SA, 1469 SA, 1297 FQT, 1298 FQT,
2. 1424 QT, 1470 SA, 1471 SA
3. Air Handler, Flood Light, Single Gate, Unit heater, Flood Light,
4. Heating and Ventilating, PTAC, Exhaust System, Radiant Tube Heater
5. Unit Heater

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 12-27-18

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: Douglas Rushlo Date: 12/27/18

Signed: 

E-Mail: Douglas.Rushlo.ctr@mail.mil

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
UNIT HEATER, INFRA-RED, RADIANT, GAS

SITE AND BLDG #: NY-0-51 Bldg 2

LOCATION/RM #: Main Bay WO# 1470 ASSET # 10075

MECHANIC
SIGNATURE: 

DATE: 12-27-18

START TIME: 8:30 am

FINISH TIME: 9:30 am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
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.	<input checked="" type="checkbox"/>		
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.	<input checked="" type="checkbox"/>		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	For gsa/oil heaters: 1. Remove access panels if applicable. 2. Check the fire box liner or refractory for cracks and leaks. 3. Check all gas lines for leaks. Repair as needed.	<input checked="" type="checkbox"/>		No Leaks No cracks in fire box
2	Clean dirt from heater, vaccuming is preferred.	<input checked="" type="checkbox"/>		
3	Check operation of gas valve.	<input checked="" type="checkbox"/>		Gas valve operated correctly
4	Check for gas leaks.	<input checked="" type="checkbox"/>		No gas leaks
5	Check operation of thermostat.	<input checked="" type="checkbox"/>		
6	If applicable, replace primary air intake filter.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Intake Filter is clean used air and Blower out
7	As needed, clean spark electrode and reset gap, replace if necessary.	<input checked="" type="checkbox"/>		
8	Inspect flue pipe and connections.	<input checked="" type="checkbox"/>		
9	If applicable, inspect and clean outside air blower and blower intake.	<input checked="" type="checkbox"/>		
10	Inspect unit for proper operation.	<input checked="" type="checkbox"/>		
11	Inspect unit for overall condition and recommend for replacement or other needed repairs.	<input checked="" type="checkbox"/>		Filters should be replaced on the next P.M.

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: