

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: \_\_\_\_\_ Date of Visit: \_\_\_\_\_

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. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

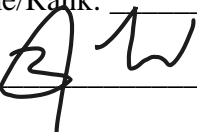
Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

### DDC CONTROLLER

SITE AND BLDG #: VA006-01      2248,2249,2250      MECHANIC SIGNATURE: *[Signature]*      DATE: 09-14-21  
    2251,2252,2253  
 LOCATION/RM #: \_\_\_\_\_ WO# 14946      ASSET # \_\_\_\_\_      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	Obtain username and password for login. If not available, contact appropriate company manager to obtain access.	✓		
2	Login into system, check for any alarms currently on system. Make necessary repairs to correct alarms back to normal state.	✓		
3	Check physical condition of the device. Shut off power to the unit.Vacuum any remaining dust. Turn power back on to the unit.	✓		
4	Check all fuses for evidence of heating or weakening.	✓		
5	Check sytem for alarms	✓		
6	Check all plug connections in the panel to ensure the plugs are fully seated.	✓		

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: HVAC Technician

**Additional Notes:**

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

### PTAC

SITE AND BLDG #: VA006-01MECHANIC  
SIGNATURE: DATE: 09-14-21LOCATION/RM #: WO# 14946 ASSET # 2246START TIME: 0900FINISH 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, as needed.	✓		
2	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	Clean the filter with a vacuum or running water. Inspect filter quarterly, replace/clean as needed	✓		
2	Remove the front grille and clean it with a dampened cloth.	NA		
3	Inspect the control panel door and plug. Repair deficiencies.	✓		
4	Check the caulking around the PTAC wall sleeve to make sure all air and water openings are properly sealed.	✓		
5	Check that condensate drains properly. Remove any debris/blockages.	✓		
6	Clean condenser coils with proper coil cleaner.	✓		
7	Place drain pan cleaner tablet in the basepan to inhibit bacteria growth.	✓		
8	Check clearance around the HVAC unit to ensure that the intake air and discharge air paths are not blocked or restricted	✓		
9	Clean up work area.	✓		

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:**

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

### OUTDOOR CONDENSING UNIT

 MECHANIC  
SIGNATURE:



DATE: 09-14-21

SITE AND BLDG #: VA006-01

LOCATION/RM #: WO# 14946 ASSET # 2247

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 outage of unit with personnel in area the unit serves.	✓		
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.	✓		
3	If disposal of the equipment is required, follow regulations concerning removal of refrigerants and disposal of the unit.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Remove debris from air screen and clean underneath unit.	✓		
2	Wash coil with coil cleaning solution - Rinse Thoroughly	✓		
3	Straighten fin tubes with fin comb, as needed.	✓		
4	Check electrical connections for tightness.	✓		
5	Check mounting base for tightness.	✓		
6	Inspect fans for bent blades, unbalance, excessive noise and vibrations.	✓		
7	Inspect all piping for leaks and tighten loose connections.	✓		
8	Check wires at condenser electrical fused safety switches for tightness and burned insulation. Repair as necessary.	✓		
9	Check supply air temperature to ensure unit is operating properly. If possible record room temperature.and Humidity	✓		Room temp <u>74</u> Room Humidity <u>52</u> %
10	Inspect unit for overall condition and recommend for replacement or other needed repairs.	✓		
11	Clean up work area.	✓		

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:**