

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 12/21/21

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>PATRICK BROWN</u> | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

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

1. WO#'S , 15214 , 15287 , 15288 , 15309 , 15310 , 15482-15487 , 15492 ,
2. 15505 , 15518 , 15339 , 15488 , 15519 , 15520
3. ASSET#'S , 9891 , 9896 , 9932 , 9935 , 9893-9897 , 9931 , 9943 , 9939 ,
4. 190917- , 248 , 269 , 264 , 267 , 270 , 274 , 275 ,
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 12/21/21

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: SGT STORMS Date: 12/21/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

FILTER REPLACEMENT

SITE AND BLDG #: NY039 BLDG1

**MECHANIC
SIGNATURE:** 

DATE: 12/21/21

LOCATION/RM #: BLDG1 **WO#** 15287,15288

START TIME: 8:30am

FINISH TIME: 9am

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check, clean, and/or replace filters as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	Initial and Date Filter (if disposable)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3	Initial and Date Yellow Maintenance Tag (if applicable)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
ASSET #	SIZE	QTY		NOTES/ ACTIONS
	Record Size :			
9891	20x20x2	4		this air handler needs to be replaced
	20x30x2	12		
190917-248	8x23x1	14		
	11x33x16	6		
	NOTE : Any AHU with outside air -Filter gets replaced Quarterly			
	All other filters get replaced annually But inspected Quarterly			

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 Technician

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

AIR HANDLER

SITE AND BLDG #: NY039 BLDG1

MECHANIC
SIGNATURE: 

DATE: 12/21/21

LOCATION/RM #: exterior boiler room

START TIME: 8am

FINISH TIME: 8:30am

WO# 15287 ASSET # 9891

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Remove power at Drive or at Breaker Panel. Verify with tester or meter that power has been removed. Install lock out tag out if servicing alone or in confined space for safety precautions.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check fan blades and moving parts for cracks and excessive wear.	✓		
2	Check running motor amperatures on all three phases (record in note column) notate L1, L2, and L3 amp draws.-Inspect contactors	✓		L1 <u>0</u> L2 <u>0</u> L3 <u>0</u>
3	Tighten all electrical connectors/lugs to proper torque.	✓		
4	If unit is a multi-zone air handler, then check each individual zone damper and associated controls.	✓		
5	Check bearing collar set screws on fan shaft to make sure they are tight.	✓		
6	Replace filters quarterly, replace as necessary. Check belt, repair or replace as necessary.	✓		
7	Check damper actuators and linkage for proper operation. Adjust linkage on dampers if out of alignment.	✓		
8	Lubricate mechanical bearings and connections sparingly.	✓		
9	Clean coils by brushing, blowing, vacuuming	✓		
10	Check coils for leaking, tightness of fittings.	✓		
11	Use fin comb to straighten coil fins.	✓		
12	Report any equipment rust or condensate pan rust -IF found open CM	✓		
13	Flush and clean condensate pans and drains, Hose down coils and drain pans and wash with an appropriate EPA approved solution approved solution. Treat condensate pans with an EPA approved biocide.	✓		
14	Check belts for wear and cracks, adjust tension or alignment. Replace belts when necessary. Multi-belt drives shall only be replaced with matched sets.	✓		
15	Check rigid couplings for alignment on direct drives, and for tightness of assembly. Check flexible couplings for alignment and wear.	✓		

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
16	Check and test freezestat for proper operation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
17	Vacuum interior of unit.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
18	Check filter doors and access doors for proper gasketing and air leaks. Correct as necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
19	Lubricate fan shaft bearings while unit is running. Add grease slowly until slight bleeding is noted from the seals. Do not over lubricate. Remove old or excess lubricant.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
20	Clean up work area.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

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:

air handler is not running at this time
there is a work order in to have it
replaced