

**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**  
**MISCELLANEOUS KITCHEN EQUIPMENT**

3Y001,3Y003,3Y004

MECHANIC

ACTIVITY AND BLDG #: VA701-01

3Y005,3Y006,3Y008

SIGNATURE: *[Signature]*

DATE: 11-23-21

LOCATION/RM #: WO# 15289 ASSET # 3Y009,3Y010,3Y014  
 3Y015

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	Notify cafeteria operator and get permission prior to performing all maintenance.			
2	De-energize, lock out, and tag electrical circuits and fuel service.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operator or manager for any deficiencies, verify cleaning program.			
2	Check all controls, mechanisms for proper operation; adjust as required.			
3	If applicable, examine utility supply line, piping, valve packing, specialties, and insulation; look for any leaks.			
4	If applicable, check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.			
5	Ensure unit is clean and in working order. Note any deficiencies.			

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 FOOD SERVING TABLE

ACTIVITY AND BLDG #: VA701-01MECHANIC  
SIGNATURE: *Atkins R. H. L.*DATE: 11-23-21LOCATION/RM #: \_\_\_\_\_ WO# 15289 ASSET # 3Y002START 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	Notify cafeteria operator and get permission prior to performing all maintenance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	If any safety deficiencies are found which could cause injury or damage, notify the cafeteria operator immediately and secure the equipment from further operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Clean all exterior laminated surfaces, aluminium hardware and wire shelves with a mild soap solution, using a damp cloth followed by a lint-free dry cloth.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	All glass can be cleaned with a non-abrasive cleaner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Plexiglas can be cleaned and polished with specialized acrylic cleaners. Do not use strong alkali solutions, steel wool, or abrasive cleaners.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Stainless steel surfaces may be cleaned with a non-abrasive cleaner applied liberally. Wipe and dry with smooth strokes in the direction of the polish marks on the steel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	To clean the interior of the display case and wire shelves, use a mild soap solution using a damp cloth followed by a lint-free dry cloth, being sure to wring out excess water	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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To be performed by: General Maintenance Worker

**Additional Notes:**

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST DISHWASHING MACHINE

ACTIVITY AND BLDG #: VA701-01MECHANIC  
SIGNATURE: *Richard R. Hall*DATE: 11-23-21LOCATION/RM #:                      WO# 15289 ASSET # 3Y007START 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	Notify cafeteria operator and get permission prior to performing all maintenance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	De-energize, lock out, and tag electrical circuits and fuel service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operator or manager for any deficiencies, verify cleaning program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Check motor and bearings for excessive noise, vibration, and overheating. Clean motor ventilator openings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Check electric insulators, connection and wiring, including inside access panels and junction boxes, and final connections. Tighten loose connections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Test electrical controls, signal lights, timer, and OFF/ON switches. Test timer and switches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Examine all pump suction and discharge connections for leakage, adjust packing nuts as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	Check temperature regulator and adjust or calibrate as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7	Check thermostatic control solenoid valve for a minimum of 100° prewash, 140° for wash, and 140° or 180°F for final rinse. (Low temp machines at 140°F.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8	Check operation of wash and rinse spray mechanism for spray coverage and drainage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9	Inspect soap and spray solution feeder lines; clean as necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10	Inspect water/steam lines and fittings for leaks; tighten fittings as necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11	Check packing glands on wash, rinse, and drain valves; add or replace packing as required. Tighten nuts, bolts, and screws.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12	Check lubricant in gear case; add manufacturer's recommended oil if required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
13	Inspect splash curtain for tears, clearance, and water tightness; adjust if required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14	Check proper operation of solenoid valve and float in fill tank; adjust as required. Check and repair insulation as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
15	Check proper operation of micro-switch.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16	Check doors for operations of chains and counterweights, warping, alignment and water tightness.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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To be performed by: General Maintenance Worker

**Additional Notes:**

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

**ACTIVITY AND BLDG #:** VA701-01 3Y011,3Y012  
3Y013

MECHANIC  
SIGNATURE: Richard R. Bell DATE: 11-23-21

LOCATION/RM #:	WO# 15289	ASSET #
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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	Notify cafeteria operator and get permission prior to performing all maintenance.			
2	De-energize, lock out, and tag electrical circuits and fuel service.			
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.			
2	Check all controls, mechanisms for proper operation; adjust as required.			
3	Examine utility supply line, piping, valve packing, specialties, and insulation; look for leaks.			
4	Check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.			
5	Check the operation of thermostats; calibrate if required			
6	Clean and adjust gas burners.			
7	Check safety pilot and solenoid.			
8	Clean and adjust pilot light assembly.			
9	Check flue for proper draft or obstructions.			
10	Lubricate gas valves.			
11	Clean interior walls and elements to obtain maximum heat transfer.			
12	Check gaskets and seals; check doors for tightness and warping; lubricate hinges and repair as necessary.			
13	Examine handles, knobs and controls for tightness and safe condition.			

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To be performed by: General Maintenance Worker

**Additional Notes:**