

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD002 Date of Visit: 11/29/21

Contractor Personnel on Site:

- | | |
|-----------------------|----------|
| 1. _____ | 3. _____ |
| 2. <u>Brian Davis</u> | 4. _____ |

Work Performed:

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

1. _____
2. _____
3. _____
4. _____
5. _____

73

52

CERTIFICATION OF WORK

To be signed by the Contractor:

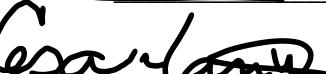
Print Name: Johnny W Brown Date: 11/29/21

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: SFC Cesar Torres Date: 11/29/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
DEHUMIDIFIER

SITE AND BLDG #: **MD002 B-7**MECHANIC
SIGNATURE: DATE: **11/29/21**LOCATION/RM #: **WO# 15339**

ASSET #

MD02-286, 287START 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.		✓	could not access the vaults
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check water inlet and outlet for any leaks, repair as needed.		✓	
2	Clean and/or replace filter as needed. -Record space humidity		✓	Space Humidity <u>50</u> %
3	If applicable, check hours per usage, replace tanks's as needed.		✓	

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:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
MAKE UP AIR UNIT - HEATING/COOLING

SITE AND BLDG #: **MD002 B-7**MECHANIC
SIGNATURE: DATE: **11/10/21**

LOCATION/RM #:

WO# 15339 ASSET #**MD02-120,121**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 shutdown with operating personnel.	✓		
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.	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check thermostat settings to ensure the cooling and heating systems are operating correctly.	✓		
2	Tighten all electrical connections and measure voltage and current on motors.	✓		
3	Check filters and clean or replace as necessary.	✓		
4	Lubricate all moving parts.	✓		
5	Check and inspect the condensate drain in your central air conditioner, furnace and/or heat pump (when in cooling mode).	✓		
6	Check controls of the system to ensure proper and safe operation. Check the starting cycle of the equipment to assure the system starts, operates, and shuts off properly.	✓		
7	Clean evaporator and condenser air conditioning coils.	✓		
8	Clean and adjust blower components to provide proper system airflow.	✓		
9	Check all gas (or oil) connections, gas pressure, burner combustion and heat exchanger.	✓		

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:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
OUTDOOR CONDENSING UNIT

SITE AND BLDG #: MD002 B-7	MECHANIC SIGNATURE:	Brian Davis	DATE: 11/03/21
LOCATION/RM #: WO# 15339 ASSET # MD02-101-111		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:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
DUCTLESS MINI SPLIT

SITE AND BLDG #: **MD002 B-7**MECHANIC
SIGNATURE:DATE: **11/29/21**

LOCATION/RM #: **MD02-138** - **211** WO# **15339** ASSET # **0900** START TIME: **1630** 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 all electrical connections	✓		
3	Check that the fan runs properly in all speeds as applicable.	✓		
4	Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary.	✓		
5	Check filter door for proper gasketing and air leaks. Correct as needed.	✓		
6	Change or Clean filter as needed. Filters get checked quarterly.	✓		
7	Ensure condensate pump is working properly and that the drain lines are clear.	✓		
8	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: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
VARIABLE FREQUENCY DRIVE

SITE AND BLDG #: **MD002 B-7**MECHANIC
SIGNATURE:DATE: **11/29/21**LOCATION/RM #: **MD02-291, 292****MD02-291, 292**WO# **15339** 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	Perform a complete visual inspection and cleaning. Broken or damaged parts are replaced as required. Inspected for ambient temperature, dust, dirt, moisture, evidence of overheating, corrosion, integrity, etc. Capacitors are checked for leakage. Conductors and parts are checked for proper insulation. Drives are cleaned using vacuum or compressed air as required. Filters are cleaned or replaced. Power connections are re-torqued to manufacturer's specifications.	✓		

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:

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

FACID/Building: MD002 Date of Visit: 11/4/2021

Contractor Personnel on Site:

- | | |
|--------------------|----------|
| 1. <u>B. Davis</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Calls – Service Call Number and Description

- | | |
|-------------------------------------------|-----------------------|
| 1. <u>PM 11 VFR units no issues found</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | asset: MD02-101 - 111 |

WO # 15339 CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: BRIAN DAVIS Date: 11/4/2021

Signed: B. Davis

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: MS. Shatreese Mistry Date: 2021.11.04

Signed: S. Mistry

E-Mail: _____