

**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. PATRICK BROWN      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**  
**FAN COIL UNIT**

SITE AND BLDG #: **NY039 BLDG1**LOCATION/RM #: **BLDG1** WO# **15485** ASSET # **9896**MECHANIC  
SIGNATURE: DATE: **12/21/21**START TIME: **12:30pm**FINISH TIME: **1pm**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
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.	<input checked="" type="checkbox"/>		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check fan blades for dust buildup and clean if necessary.	<input checked="" type="checkbox"/>		fan blades are clean
2	Check fan blades and moving parts for cracks and excessive wear.	<input checked="" type="checkbox"/>		no cracks found no excessive wear
3	Tighten all electrical connectors to proper torque as needed.	<input checked="" type="checkbox"/>		electrical connections are tight
4	Check that the fan runs properly in all speeds as applicable.	<input checked="" type="checkbox"/>		fan runs properly in all settings
5	Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary. Check felt, repair or replace as necessary.	<input checked="" type="checkbox"/>		all are good
7	Lubricate mechanical connections of dampers sparingly as applicable.	<input checked="" type="checkbox"/>		used white lithium grease
8	Check the valve(s) for signs of leakage and proper operation. If leak is detected, submit a CM.	<input checked="" type="checkbox"/>		no signs of leaks
9	Clean coils by brushing, blowing, vacuuming	<input checked="" type="checkbox"/>		coils are clean
10	Check coils for leaking, tightness of fittings.	<input checked="" type="checkbox"/>		no leaks found fittings are tight
11	Use fin comb to straighten coil fins as needed.	<input checked="" type="checkbox"/>		fins are straight
12	Check belts for wear and cracks, adjust tension or alignment as applicable. Replace belts when necessary.	<input checked="" type="checkbox"/>		no belts
13	Check rigid couplings for alignment on direct drives, and for tightness of assembly	<input checked="" type="checkbox"/>		direct drives assemblies are tight
14	Vacuum interior of unit.	<input checked="" type="checkbox"/>		Interiors of units are clean
15	Check filter door for proper gasketing and air leaks. Correct as needed.	<input checked="" type="checkbox"/>		no air leaks found
16	Change the filter as needed with the correct size and type filter.	<input checked="" type="checkbox"/>		Filter gets checked Quarterly
17	Insure that drain(s) are clear and running. - Install condensate tablet	<input checked="" type="checkbox"/>		drains are clear
18	Clean up work area. - Record Humidity level in area	<input checked="" type="checkbox"/>		Humidity %

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:**