

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD002 Date of Visit: 12/14/21

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. _____

74

43

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 12/14/21

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: 12/14/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
AIR CURTAIN

SITE AND BLDG #: **MD002 B-1**LOCATION/RM #: **WO# 15570 ASSET # 1820**MECHANIC
SIGNATURE:DATE: **10/13/21**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	Disconnect the power to the unit.			
2	Remove the intake grille by removing all screws around the edges.			
3	Vacuum and wash (if necessary) to remove the buildup of dirt and debris.			
4	If necessary, lubricate the motors.			
5	Reinstall the cover and intake grille.			
6	Verify proper operation of unit. Make and/or recommend any needed repairs.			

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
EXPANSION TANKS

SITE AND BLDG #: **MD002 B-1**LOCATION/RM #: **WO# 15570 ASSET # 1629**MECHANIC
SIGNATURE: DATE: **12/13/21**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	Examine exterior of tank including fittings and valves for leaks, signs of corrosion, and correct as needed.	✓		
2	If applicable, Check sight glass, insure level is between 1/2 and 3/4 sight glass. Correct as needed.	✓		
3	If applicable, check tank pressure via schrader valve. Correct 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
GLYCOL TANK

SITE AND BLDG #: MD002 B-1

MECHANIC
SIGNATURE:

DATE: 12/13/21

LOCATION/RM #: WO# 15570 ASSET # 1628

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	Examine exterior of tank, including fittings, gauges, structural supports, manholes, and handholes for leaks, signs of corrosion, or other defects.	✓		
2	Clean, test and inspect sight glasses, valves, fittings, drains, and controls.	✓		
3	Check condition of agitators and/or float assemblies.	✓		
4	If applicable, clean strainer(s).	✓		
5	Clean up work site.- Report any issues	✓		

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:

checked the operation of the chemical feeders

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
GREASE TRAP

SITE AND BLDG #: MD002 B-1

LOCATION/RM #: WO#15570 ASSET # 1504

MECHANIC
SIGNATURE:

DATE: 12/13/21

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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Insure proper grease disposal.-Tanks are pumped by local septic companies	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Remove lid. If the trap is equipped with removable baffles, remove them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Make sure the flow restrictor on the inflow pipe is present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	If damages, missing parts, or cleaning is required, report them as needed to ensure proper working operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Replace lid and baffles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Record grease trap maintenance activities on your log or request a receipt from your grease hauler. Keep records for 3 years. -In Maximo under WO#	<input checked="" type="checkbox"/>	<input 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 description of the deficiency.

To be performed by: General Maintenance Technician

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
CIRCULATING AND BOOSTER PUMPS

SITE AND BLDG #: MD002 B-1

LOCATION/RM #: WO#15570 ASSET # 1623-1627

MECHANIC
SIGNATURE:


DATE: 12/13/21

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.	✓		
2	It is generally not a good idea to tamper with pumps using mechanical seals if they are otherwise performing properly. Since mechanical seals can cost as much as the pump, it is usually not cost effective to risk damaging the seal by performing an annual internal inspection of the pump.-Report any leaks	✓		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Lubricate pump and motor bearings as per manufacturer's specifications. Bearings require lubrication atleast annually.4 shots of grease per PM	✓		
2	Inspect couplings and check for any pump seal leaks.	✓		
3	Check motor mounts and vibration pads	✓		
4	Tighten all pump flanges.			
5	Visually check pump alignment and coupling -Report unusual vibration	✓	✓	
6	Inspect electrical connections	✓		

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: