

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD019 Date of Visit: 12/22/21

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

45

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W Brown Date: 12/22/21

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 William Schaffer Date: 12/22/21

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

CONDENSATE PUMP

MECHANIC SIGNATURE:  DATE: 12/22/21

SITE AND BLDG #: MD019 B-1

LOCATION/RM #: WO# 15575 ASSET #1650-1653

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 | Open pump and Wash and clean pump. IF applicable. If pump is used in a dirty environment or is pumping something other than clear condensate water, the tank should be removed and cleaned. | ✓ | | |
| 2 | Pour enough water into the tank to activate the pump. | ✓ | | |
| 3 | Ensure that the pump is in proper working condition. Recommend repair or replacement 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 discription of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

GREASE TRAP

SITE AND BLDG #: MD019 B-1

MECHANIC
SIGNATURE:


DATE: 12/22/21

LOCATION/RM #: WO#15575 ASSET # 1544

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 | Insure proper grease disposal.-Tanks are pumped by local septic companies | | | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 1 | Remove lid. If the trap is equipped with removable baffles, remove them. | | | |
| 2 | Make sure the flow restrictor on the inflow pipe is present. | | | |
| 3 | If damages, missing parts, or cleaning is required, report them as needed to ensure proper working operation. | | | |
| 4 | Replace lid and baffles. | | | |
| 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# | | | |

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 Technician

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **FAN COIL UNIT**

MECHANIC
SIGNATURE:



DATE: 11/13/21

SITE AND BLDG #: MD019 B-1

LOCATION/RM #:

WO# 15575

ASSET #

2048,2050

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 | 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. | n/a | | |
| 2 | Check fan blades and moving parts for cracks and excessive wear. | n/a | | |
| 3 | Tighten all electrical connectors to proper torque asneeded. | ✓ | | |
| 4 | Check that the fan runs properly in all speeds as applicable. | n/a | | |
| 5 | Check dampers and rotating auto diffusers for dirt accumulations, clean as necessary. Check felt, repair or replace as necessary. | n/a | | |
| 7 | Lubricate mechanical connections of dampers sparingly as applicable. | ✓ | | |
| 8 | Check the valve(s) for signs of leakage and proper operation. If leak is detected, submit a CM. | ✓ | | |
| 9 | Clean coils by brushing, blowing, vacuuming | ✓ | | |
| 10 | Check coils for leaking, tightness of fittings. | ✓ | | |
| 11 | Use fin comb to straighten coil fins as needed. | ✓ | | |
| 12 | Check belts for wear and cracks, adjust tension or alignment as applicable. Replace belts when necessary. | n/a | | |
| 13 | Check rigid couplings for alignment on direct drives, and for tightness of assembly | n/a | | |
| 14 | Vacuum interior of unit. | ✓ | | |
| 15 | Check filter door for proper gasketing and air leaks. Correct as needed. | ✓ | | |
| 16 | Change the filter as needed with the correct size and type filter. | ✓ | | Filter gets checked Quarterly |
| 17 | Insure that drain(s) are clear and running.- Install condensate tablet | ✓ | | |
| 18 | Clean up work area. - Record Humidity level in area | ✓ | | Humidity 45 % |

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To be performed by: General Maintenance Worker

Additional Notes: