CERTIFICATION OF WORK
**PREVENTIVE MAINTENANCE**

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

FACID/Building: NY013 Date of Visit: 12-20-18 / 12-18-18

Contractor Personnel on Site:

1. Patrick Brown
2. _____
3. _____
4. _____

**Work Performed:**

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

1. 1341 FQT, 1342 FQT, 1343 FQT, 1587 SA, 1588 SA, 1440 QT, 1589 SA
2. Air Handler, Unit Heater, Kitchen Hood, Overhead Exhaust System, Unit heater
3. _____
4. _____
5. _____

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Patrick Brown Date: 12-20-18

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: Hutchins, Candi M. GS09 Date: 20181220

Signed: Candi M. Hutchins

E-Mail: candi.m.hutchins.civ@mail.mil

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
## UNIT HEATER, ELECTRIC

**SITE AND BLDG #:** NY013 - Bldg 2

**MECHANIC SIGNATURE:** [signature]

**DATE:** 12-13-18

**LOCATION/RM #:** Bldg 2 Bay **WO#** 1589 **ASSET #** 9250

**START TIME:** 8:45

**FINISH TIME:** 9:30

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE YES | TASK COMPLETE NO | NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|---|---|---|---|---|
| | **SPECIAL INSTRUCTIONS** | | | |
| 1 | In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered to. | ✓ | | |
| 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 heater coils and assocoated piping for leaks or corrision. | ✓ | | NO Leaks or Corision |
| 2 | Clean heating coil. Brush vaccum where accessible. | ✓ | | |
| 3 | Inspect wiring and electrical controls for loose connections, charred, frayed or broken insulation, evidence of short circuiting, wrong size fuses, circuit breakers, or switches, and other electrical deficiencies. Tighten any loose connections. | ✓ | | All connections are good No electrical deficiencies |
| 4 | Inspect fan for bent blades, unbalance, excessive noise and vibration. | ✓ | | NO vibration or excessive noise |
| 5 | Check motor and fan shaft bearings for noise, vibraton, overheating; lubrucate bearings. | ✓ | | No lubrication required |
| 6 | Verify proper control by modulating the thermostat through complete cycle. | ✓ | | |
| 7 | Inspect unit for proper operation. | ✓ | | Unit is opperating properly |
| 8 | Inspect unit for overall condition and recommend for replacement or other needed repairs. | ✓ | | NO repairs 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 perfomed by: HVAC Technician

**Additional Notes:**