

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY039 Date of Visit: 6/21/22

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Patrick Brown</u> | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

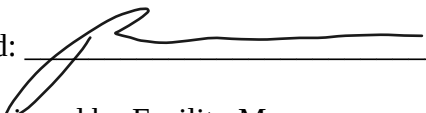
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

- | |
|---|
| 1. <u>WO#'S , 17355 , 17356 , 17377 , 17378 , 17550-17555 ,</u> |
| 2. <u>17559 , 17568 , 17574 , 17593 , 17407 , 17556 , 17594 ,</u> |
| 3. <u>17595 ,</u> |
| 4. <u>ASSET#'S , 9891 , 9896 , 9932 , 9935 , 9893-9897 , 9931 ,</u> |
| 5. <u>9943 , 9939 , 190917- , 245 , 269 , 264 , 267 , 270 , 274 ,</u> |
| <u>275</u> |

CERTIFICATION OF WORK

To be signed by the Contractor:

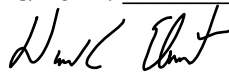
Print Name: Patrick Brown Date: 6/21/22

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: Gysgt elwart Date: 6/21/22

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

FAN COIL UNIT

SITE AND BLDG #: NY039 BLDG1

MECHANIC
SIGNATURE: 

DATE: 6/21/22

LOCATION/RM #: BLDG1 WO# 17553 ASSET # 9896

START TIME: 11am

FINISH TIME: 12pm

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.	☒	☐	fan blades are clean
2	Check fan blades and moving parts for cracks and excessive wear.	☒	☐	no cracks found no excessive wear
3	Tighten all electrical connectors to proper torque asneeded.	☒	☐	electrical connections are tight
4	Check that the fan runs properly in all speeds as applicable.	☒	☐	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.	☒	☐	all are good
7	Lubricate mechanical connections of dampers sparingly as applicable.	☒	☐	used white lithium grease
8	Check the valve(s) for signs of leakage and proper operation. If leak is detected, submit a CM.	☒	☐	no signs of leaks
9	Clean coils by brushing, blowing, vacuuming	☒	☐	coils are clean
10	Check coils for leaking, tightness of fittings.	☒	☐	no leaks found fittings are tight
11	Use fin comb to straighten coil fins as needed.	☒	☐	finns are straight
12	Check belts for wear and cracks, adjust tension or alignment as applicable. Replace belts when necessary.	☒	☐	no belts
13	Check rigid couplings for alignment on direct drives, and for tightness of assembly	☒	☐	direct drives assemblies are tight
14	Vacuum interior of unit.	☒	☐	Interiors of units are clean
15	Check filter door for proper gasketing and air leaks. Correct as needed.	☒	☐	no air leaks found
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	☒	☐	drains are clear
18	Clean up work area. - Record Humidity level in area	☒	☐	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 discription of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes: