

## CERTIFICATION OF WORK PREVENTIVE MAINTENANCE

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

FACID/Building: NY013 Date of Visit: 1-15-19

Contractor Personnel on Site:

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

### Work Performed:

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

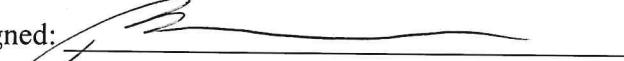
1. 1797AN, 1798AN, 1799AN, 1800AN, 1947SA, 1948SA, 1949SA, 1950SA, 1951SA, 1952SA
2. Various Kitchen Equipment, Overhead Doors, Dehumidifier
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

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## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1-15-19

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. Date: 20190115

Signed: Candi M. Hutchins

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

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**OVEN**

**ACTIVITY AND BLDG #:** NY013 ~ Bldg 1

121 Food Prep

1797

9223

**LOCATION/RM #:** Kitchen

WO# 1798

ASSET # 9224

**MECHANIC**

**SIGNATURE:**

**DATE:** 1-15-19

**START TIME:** 12:30

**FINISH TIME:** 12:45

<b>CHECK POINT</b>	<b>CHECKPOINT DESCRIPTION</b>	<b>TASK COMPLETE</b>		<b>NOTES/ ACTIONS</b> (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		<b>YES</b>	<b>NO</b>	
<b>SPECIAL INSTRUCTIONS</b>				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	✓		
2	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.	✓		
3	De-energize, lock out, and tag electrical circuits and fuel service.	✓		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	✓		Griddles have been disconnected
2	Check all controls, mechanisms for proper operation; adjust as required.		✓	11
3	Examine utility supply line, piping, valve packing, specialties, and insulation; look for leaks.		✓	Electric griddles
4	Check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.	✓		Electric lines are in good shape
5	Check the operation of thermostats; calibrate if required		✓	
6	Clean and adjust gas burners.		✓	NO Gas Burners
7	Check safety pilot and solenoid.		✓	NO Gas Supply
8	Clean and adjust pilot light assembly.		✓	11
9	Check flue for proper draft or obstructions.		✓	11
10	Lubricate gas valves.		✓	11
11	Clean interior walls and elements to obtain maximum heat transfer.	✓		Walls are clean
12	Check gaskets and seals; check doors for tightness and warping; lubricate hinges and repair as necessary.	✓		Doors are in good shape this model does not have gaskets
13	Examine handles, knobs and controls for tightness and safe condition.	✓		all handles doors and knobs are in good shape

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: