

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY067 Date of Visit: 11/4/19

Contractor Personnel on Site:

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

Work Performed:

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

1. WO'S 5749MO, 5839-5845QT, 5975PMM, 5991PMQ, 5846-5848QT,
2. 5992PMQ, 5849-5850QT
3. OUTSIDE LIGHTING, CIRCULATING PUMPS, KITCHEN EQUIP, EMERGENCY
4. LIGHTING, GATE, ISOLATION VALVES, GLYCOL FEED SYSTEM, EXP TANKS,
5. WATER HEATER, EMERGENCY LIGHTING,

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 11/4/19

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: AMMIE Mearero Date: 11/4/19

Signed: 

E-Mail:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

REACH-IN REFRIGERATORS/ FREEZERS

SITE AND BLDG #: **NY067-01**MECHANIC
SIGNATURE: DATE: **11/4/19**LOCATION/RM #: **WO# 5841 ASSET # 10566**
5842 10567START TIME: **10am**FINISH TIME: **10:30am**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	De-energize, lock out, and tag electrical circuits.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	If appliance is disposed, follow regulations concerning removal of refrigerants and disposal of the appliance.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no deficiencies noted units are clean
2	Verify indicator light on; check compartment temperature.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	compartment temperature is correct
3	Examine evaporator for proper clearances/slope and air flow.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	evaporators clearance is correct
4	Examine handles, hinges and tightness of door closure.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	handles and hinges are good
5	Examine safety door release and fan shut down safety switch.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	all are good
6	Inspect lighting for burnt out lamps. Replace if required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	replaced one bulb
7	Clean evaporator coil, evaporator drain pan, blowers, fans, motors, and drain piping as required; lubricate motor(s).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	evaporator coil is clean
8	Clean condenser coil and condensing unit section.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	condensing unit section is clean
9	Clean and inspect defrost evaporation trays/pans.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	evap trays are clean
10	Check operation of thermostats; calibrated as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	thermostat reads properly
11	Check coil superheat and adjust to manufacturers recommendations.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	superheat is correct and within specs
12	Inspect and service all electric motors.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	electric motors are good condition
13	Check box floor for water or ice accumulation.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no water or ice accumulation
14	Clean up area and note any deficiencies.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	no deficiencies noted

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: