

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: NY013 Date of Visit: 1/28/20

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. WO'S 6637-6640AN, 6778-6781SA, 6823PMM, 6782-6783SA
2. VARIOUS KITCHEN EQUIP, OVERHEAD DOORS, LIGHTING, DEHUMIDIFIER
3. _____
4. _____
5. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Patrick Brown Date: 1/28/20

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 KEVIN STEWART Date: 1/28/20

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

DISHWASHING MACHINE

ACTIVITY AND BLDG #: **NY013-01**MECHANIC
SIGNATURE: DATE: **1/28/20**LOCATION/RM #: WO# **6640** ASSET # **9230**START TIME: **9:15am**FINISH TIME: **9:30am**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	De-energize, lock out, and tag electrical circuits and fuel service.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operator or manager for any deficiencies, verify cleaning program.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	Check motor and bearings for excessive noise, vibration, and overheating. Clean motor ventilator openings	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3	Check electric insulators, connection and wiring, including inside access panels and junction boxes, and final connections. Tighten loose connections.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
4	Test electrical controls, signal lights, timer, and OFF/ON switches. Test timer and switches.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
5	Examine all pump suction and discharge connections for leakage, adjust packing nuts as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
6	Check temperature regulator and adjust or calibrate as required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
7	Check thermostatic control solenoid valve for a minimum of 100° prewash, 140° for wash, and 140° or 180°F for final rinse. (Low temp machines at 140°F.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
8	Check operation of wash and rinse spray mechanism for spray coverage and drainage.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
9	Inspect soap and spray solution feeder lines; clean as necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
10	Inspect water/steam lines and fittings for leaks; tighten fittings as necessary.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
11	Check packing glands on wash, rinse, and drain valves; add or replace packing as required. Tighten nuts, bolts, and screws.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
12	Check lubricant in gear case; add manufacturer's recommended oil if required.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
13	Inspect splash curtain for tears, clearance, and water tightness; adjust if required.		<input checked="" type="checkbox"/>	
14	Check proper operation of solenoid valve and float in fill tank; adjust as required. Check and repair insulation as needed.		<input checked="" type="checkbox"/>	
15	Check proper operation of micro-switch.		<input checked="" type="checkbox"/>	
16	Check doors for operations of chains and counterweights, warping, alignment and water tightness.		<input checked="" type="checkbox"/>	

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:

there is a CM request for this unit and I cannot do a complete p.m. until the unit is repaired