

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD003 Date of Visit: 12/7/18

Contractor Personnel on Site:

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

**Work Performed:**

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

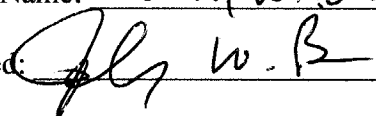
1. 6776 QT, 6793 QT
2. Grease Trap, Grease Trap, Hot Water Pump, Exp Tank, Hot Water Pump, Suspended
3. Hot Water Pump, Expansion Tank
4. \_\_\_\_\_
5. \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W. Brown Date: 12/7/18

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: MARC ACITO Date: 12/7/18

Signed: 

E-Mail: \_\_\_\_\_

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **CIRCULATING AND BOOSTER PUMPS**

**SITE AND BLDG #:** MD 003 B-2

**MECHANIC  
SIGNATURE:**

*[Signature]*

**DATE:** 12/7/18

**LOCATION/RM #:** OWS Mech. WO# 6793 ASSET # 1633

**START TIME:** 0900

**FINISH TIME:** 1630

| CHECK<br>POINT                             | CHECKPOINT DESCRIPTION                                                                                                                                                                                                                                                                          | TASK COMPLETE        |    | NOTES/ ACTIONS<br>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----|-------------------------------------------------------------------------|
|                                            |                                                                                                                                                                                                                                                                                                 | YES                  | NO |                                                                         |
|                                            |                                                                                                                                                                                                                                                                                                 | 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.                                                                                                                                     | /                    |    |                                                                         |
| 3                                          | It is generally not a good idea to tamper with pumps using mechanical seals if they are otherwise performing properly. Since mechanical seals can cost as much as the pump, it is usually not cost effective to risk damaging the seal by performing an annual internal inspection of the pump. | /                    |    |                                                                         |
| TO BE PERFORMED AT EACH INSPECTION SERVICE |                                                                                                                                                                                                                                                                                                 |                      |    |                                                                         |
| 1                                          | Lubricate pump and motor bearings as per manufacturer's specifications. Bearings require lubrication atleast annually.                                                                                                                                                                          | /                    |    |                                                                         |
| 2                                          | Inspect couplings and check for any pump seal leaks.                                                                                                                                                                                                                                            | /                    |    |                                                                         |
| 3                                          | Check motor mounts and vibration pads                                                                                                                                                                                                                                                           | /                    |    |                                                                         |
| 4                                          | Tighten all pump flanges.                                                                                                                                                                                                                                                                       | /                    |    |                                                                         |
| 5                                          | Visually check pump alignment and coupling                                                                                                                                                                                                                                                      | /                    |    |                                                                         |
| 6                                          | Inspect electrical connections                                                                                                                                                                                                                                                                  | /                    |    |                                                                         |

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:**

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST EXPANSION TANKS

SITE AND BLDG #: MD003 B-2

MECHANIC SIGNATURE: [Signature] DATE: 12/7/18

LOCATION/RM #: OMS Mech WO# 6793 ASSET # 1634

START TIME: 0900 FINISH TIME: 1630

| CHECK<br>POINT                             | CHECKPOINT DESCRIPTION                                                                                                                                                        | TASK COMPLETE                       |                          | NOTES/ ACTIONS                                        |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------------------------|
|                                            |                                                                                                                                                                               | YES                                 | NO                       | (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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                                       |
| 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.                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                                       |
| TO BE PERFORMED AT EACH INSPECTION SERVICE |                                                                                                                                                                               |                                     |                          |                                                       |
| 1                                          | Examine exterior of tank including fittings and valves for leaks, signs of corrosion, and correct as needed.                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                                       |
| 2                                          | Test air pressure in tank. Ensure air pressure is at correct PSI. Correct as needed.                                                                                          | <input checked="" type="checkbox"/> | <input 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: