

**CERTIFICATION OF WORK  
PREVENTIVE MAINTENANCE**

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

FACID/Building: MD024 Date of Visit: 12/6/18

Contractor Personnel on Site:

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

**Work Performed:**

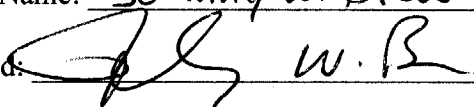
**Preventive Maintenance - Services Completed** (Annual, Quarterly, Monthly, equipment identification, etc.)

1. 6764 MO, 6809 SA, 6810 SA, 6811 SA, 6812 SA
2. Auto Gate, Unit Heater, Suspended, Unit Heater, Suspended, Unit Heater
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Johnny W. Brown Date: 12/6/18

Signed:  W. B.

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: Richard Gayten LC-10 Date: 20181206

Signed: 

E-Mail: richard.gayten.civ@mil.mil

# **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST** **UNIT HEATER, ELECTRIC**

SITE AND BLDG #: MD 024 B-6AMECHANIC  
SIGNATURE: *[Signature]*DATE: 12/6/18LOCATION/RM #: 6A WO# 6812 ASSET # 2173START TIME: 0900FINISH TIME: 1630

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS  (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.	<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	Check heater coils and assoicated piping for leaks or corrsion.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Clean heating coil. Brush vaccum where accessible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Inspect wiring and electrical controls for loose connections, charred, frayed or broken insulation, evidence of short circuiting, wrong size fuses, circuit breakers, or switches, and other electrical deficiencies. Tighten any loose connections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Inspect fan for bent blades, unbalance, excessive noise and vibration.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Check motor and fan shaft bearings for noise, vibraton, overheating; lubricate bearings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	Verify proper control by modulating the thermostat through complete cycle.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7	Inspect unit for proper operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8	Inspect unit for overall condition and recommend for replacement or other needed repairs.	<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 description of the deficiency.

To be performed by: HVAC Technician

**Additional Notes:**