

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: _____ Date of Visit: _____

Contractor Personnel on Site:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed:

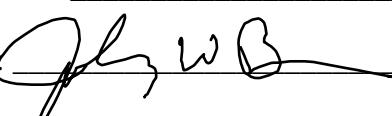
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| - | |
| 3. _____ | _____ |
| - | |
| 4. _____ | _____ |
| - | |
| 5. _____ | _____ |
| - | |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _____ Date: _____

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 Renee Bungy Date: 4/5/19

Signed: Renee Bungy

E-Mail: _____

MD048						
Location	WO #	Asset #	Asset Description	Model Number	Serial #	Initial Once Completed
MD048-01	8223	1296	J-1502000-17 4-pc Thermostat, DigitalThroughout			<i>JWB</i>
MD048-01	8271	1297	J-1502000-18 1-pc Security Panel	DATE TBD BY 99TH		
MD048-01	8271	1298	J-1502000-18 1-pc Security Panel	DATE TBD BY 99TH		
MD048-01	8271	1299	J-1502000-55 1-pc Arms Vault / Arms Vault	DATE TBD BY 99TH		

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
THERMOSTATS

SITE AND BLDG #: **MD048**MECHANIC
SIGNATURE: DATE: **4/5/19**LOCATION/RM #: **WO# 8223 ASSET # 1296**START TIME: **0900** FINISH 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.	<input checked="" 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"/>		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	If EMS (Energy Management System) If it is EMS controlled 1-We log into computer with user name and password for EMS or DDC obtained from site personnel. 2-Vailidate set point and actual temp at computer	<input checked="" type="checkbox"/>		the computer needs to be replaced. I couldn't get into the program to check the thermostats against the readings on the computer.
2	Review all zone set points at the server IF Applicable	<input checked="" type="checkbox"/>		
3	Inspect thermostat installation; ensure mounting is correct, fastened secure and that the thermostat is not blocked by equipment generating heat or furniture blocking air circulation.	<input checked="" type="checkbox"/>		
4	Remove thermostat cover and lightly blow away any accumulated dust with canned low pressure air.	<input checked="" type="checkbox"/>		
5	If applicable, replace battery as needed.	<input checked="" type="checkbox"/>		
6	Use our own Temperature meter to validate the computer is correct. If it is not EMS or DDC controlled take our temperature meter and check against actual thermostat and record temperature	<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 perfomed by: HVAC Technician

Additional Notes: