

**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:

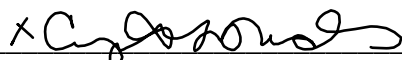
Print Name: _____ Date: _____

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: _____ Date: _____

Signed: 

E-Mail: _____

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST EXHAUST FANS

**MECHANIC
SIGNATURE**

DATE: 6-12-19

START TIME: 7 AM

FINISH TIME: 5 PM

SITE AND BLDG #: NY010-01

3748

LOCATION/RM #: WO# 9105 ASSET # 3863

3898

CHECKPOINT 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.	X		
2	Schedule shutdown with operating personnel, as needed.	X		
3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	X		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Clean unit, especially fan blades.	X		
2	Inspect pulleys, belts, couplings, etc.; adjust tension and tighten mountings as necessary. Change badly worn belts. Multiple belts should be replaced with matched sets.	X		
3	Perform required lubrication and remove old or excess lubricant.	X		
4	Clean motor with vacuum or low pressure dry air (less than 40 psig). Check for obstructions in motor cooling and air flow.	X		
5	Check structural members, vibration eliminators, and flexible connections. Check fan housing to ensure there is no damage and the housing is tight.	X		
6	Start unit and check for vibration and noise.	X		
7	Remove all trash and debris.	X		

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:

Found 1 EXHAUST FAN ON ROOF. IT IS NO LONGER IN USE. THE KITCHEN HAS BEEN REMOVED.

THE OTHER TWO EXHAUST FANS ARE EXHAUST HOODS FOR ENERGY RECOVERY SYSTEM.
ASSET 374B NEEDS REMOVED FROM ROOF & CURB CAPPED. ASSET 389B SHOULD BE CALLED EXHAUST HOODS FOR ENERGY RECOVERY SYSTEM