

**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. | _____ X _____ 9331QT | |
| 2. | _____ | |
| | — | |
| 3. | _____ | |
| | — | |
| 4. | _____ | |
| | — | |
| 5. | _____ | |
| | — | |

CERTIFICATION OF WORK

To be signed by the Contractor:

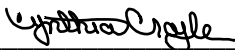
Print Name: _____ Date: _____

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

UNIT HEATER, ELECTRIC

SITE AND BLDG #: PA027-02

**MECHANIC
SIGNATURE:**
DATE: 6-24-19

LOCATION/RM #: **WO#** 9436 **ASSET #** 4196

START TIME:

7AM

FINISH TIME:

5PM

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.	X		
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.	X		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check heater coils and assocoated piping for leaks or corrision.	X		
2	Clean heating coil. Brush vaccum where accessible.	X		
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.	X		
4	Inspect fan for bent blades, unbalance, excessive noise and vibration.	X		
5	Check motor and fan shaft bearings for noise, vibraton, overheating; lubrucate bearings.	X		
6	Verify proper control by modulating the thermostat through complete cycle.	X		
7	Inspect unit for proper operation.	X		
8	Inspect unit for overall condition and recommend for replacement or other needed repairs.	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 description of the deficiency.

To be performed by: HVAC Technician

Additional Notes:

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **DOMESTIC HOT WATER HEATER - GAS**

SITE AND BLDG #: PA027-02

**MECHANIC
SIGNATURE:**

DATE:

LOCATION/RM #:

WO# 9436

ASSET # 4266,4309,4519

START TIME:

FINISH TIME:

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.	X		
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.	X		
3	Use caution when working with natural gas fired equipment. Be aware of any smells (rotten egg) that could be a natural gas leak.	X		
4	Do not allow any open flames around equipment.	X		
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Attach drain hose. Drain several gallons from tank to remove sediment.	X		
2	Manually check operation of safety valve. Check for corrosion around valve. Verify the safety valve inspection tag is in place. Ensure that no personnel are in area of relief piping discharge.	X		
3	Check all connections - electric, gas and water. Tighten as necessary.	X		
4	Check operation and setting of aquastat. Check hot water temperature with dial thermometer, and set aquastat at minimum value required for all uses.	X		
5	Drain storage and expansion tanks, and flush to remove sediment, scale, and solid at bottom of tank.	X		
6	Clean sight glasses on tanks.	X		
7	Clean strainer, check condition of traps. Report and repair leaks.	X		
8	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.	X		
9	If applicable, Remove and inspect Anode, replace if necessary	X		
10	Clean up work area and remove trash.	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:

4519 ASSETS RED TAGGED OUT OF SERVICE/CONDEMNED