

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**MISCELLANEOUS KITCHEN EQUIPMENT**

**ACTIVITY AND BLDG #:** **Plattsburgh 054**

**LOCATION/RM #:** **kitchen** WO# 

**ASSET #** 

**MECHANIC  
SIGNATURE:**



**DATE:** **2/9/2022**

**START TIME:** **1100**

**FINISH TIME:** **1145**

| CHECK POINT                                       | CHECKPOINT DESCRIPTION  | TASK COMPLETE   |    | NOTES/ ACTIONS<br>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|---|---|---|----|---|
|   |   | YES   | NO |   |
| <b>SPECIAL INSTRUCTIONS</b>                       |   |   |    |   |
| 1   | Notify cafeteria operator and get permission prior to performing all maintenance.   |    |    |   |
| 2   | 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. |    |    |   |
| 3   | De-energize, lock out, and tag electrical circuits and fuel service.  |    |    |   |
| <b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b> |   |   |    |   |
| 1   | Check with operator or manager for any deficiencies, verify cleaning program.   |    |    |   |
| 2   | Check all controls, mechanisms for proper operation; adjust as required.  |    |    | <b>meat slicer, coffee urn, toaster are</b>                             |
| 3   | If applicable, examine utility supply line, piping, valve packing, specialties, and insulation; look for any leaks.   |    |    | <b>missing</b>  |
| 4   | If applicable, check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.   |   |    |   |
| 5   | Ensure unit is clean and in working order. Note any deficiencies.   |  |    |   |

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: General Maintenance Worker

**Additional Notes:**