

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FILTER REPLACEMENT

Schenectady 060

SITE AND BLDG #: _____

LOCATION/RM #: site WO# _____

MECHANIC SIGNATURE: _____

DATE: 9/20/2022 9/21/2022

START TIME: 0800 FINISH TIME: 1400

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check, clean, and/or replace filters as required.			
2	Initial and Date Filter (if disposable)			
3	Initial and Date Yellow Maintenance Tag (if applicable)			
ASSET #	SIZE	QTY		NOTES/ ACTIONS
190917-406	20x30x2	1		
190917-407	18x24x2	1		
190917-408	14x20x2	1		
190917-409	14x20x2	1		
190917-410	16x20x2	1		
190917-411	16x20x2	1		
190917-412	18x24x2	1		
10422	20x20x2	8		
10422	20x20x4	8		
10422	16x20x2	8		
10423	20x20x2	4		

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 Technician

Additional Notes: