

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FILTER REPLACEMENT

SITE AND BLDG #: **NY 010 01**MECHANIC
SIGNATURE: **Bill Davis**DATE: **9/12/23**LOCATION/RM #: **WO# 13754 3375**START TIME: FINISH TIME:

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	
Record Size :	2 20x25x1			
NOTE : Any AHU with outside air -Filter gets replaced Quarterly				
All other filters get replaced annually But inspected Quarterly				

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: