

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

FILTER REPLACEMENT

SITE AND BLDG #: NY127 BLDG2

**MECHANIC
SIGNATURE:** 

DATE: 12/20/22

LOCATION/RM #: BLDG2 **WO#** 19803,20181

START TIME: 11am

FINISH TIME: 12pm

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.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2	Initial and Date Filter (if disposable)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3	Initial and Date Yellow Maintenance Tag (if applicable)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
ASSET #	SIZE	QTY		NOTES/ ACTIONS
	Record Size :			
190917-691	16x24x2	1		
190917-695	15x11- 3/8 x3/8 box filter	4-2		15x11 are washable
190917-698	16x20x2 - 16x25x2 - 20x16x12	6-4-6		
190917-705	20x20x4	1		
190917-706	16x20x4	1		
	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: